



COUNTY OF LAKE
VOLUNTEER PROGRAM

Human Resources Department
255 N. Forbes Street, Lakeport, CA 95453
Ph: (707) 263-2213 Fx: (707) 262-1843

APPLICATION

Date: _____

VOLUNTEER APPLICANT INFORMATION:

First Name:	Middle Initial:	Last Name:
Address:		
Home Phone:	Cell Phone:	
Areas of Interest:		

WORK EXPERIENCE:

Job Title	Employer Address	Length of Employment
Current:		
Previous:		
Previous:		
Previous:		

VOLUNTEER EXPERIENCE:

Job Title	Work Location	Length of Service

EDUCATION:

Indicate last year completed:

High School 1 2 3 4 School/Major: _____

College 1 2 3 4 School/Major: _____

Trade/Graduate School 1 2 3 4 School/Major: _____

Relevant Course Work, Computer, Special Skills, Certificates or License:

What are your personal goals through volunteering?

DAYS/TIME AVAILABLE TO WORK:

Hours Per Week: _____

Check Available Days/Time: M Tu W Th F Sat Sun
 Flexible Mornings Afternoons Evenings

Length of Assignment Check: 3 months 6 months 1 year Ongoing

Are you willing to be called for short-term spot jobs? YES NO

Are you **Fluent** in other languages? _____

In times of a County-wide disaster, can we call you to assist in any of the below areas? YES NO

Coordination/Publicity/Writing/Research/Clerical/Administrative/Childcare/Manual Labor
Special Skills: _____

TRANSPORTATION:

Do you drive? YES NO

Do you have auto insurance? YES NO

Are you willing to drive your own/county car if part of the job? YES NO

Some jobs may require a background check. You may be required to complete additional paperwork if that is the case.