



**CITY OF COVINGTON**

Personnel  
16720 SE 271<sup>st</sup> Street, Suite 100, Covington WA 98042  
Tele: (253) 480-2410  
Fax: (253) 480-2401

**VOLUNTEER APPLICATION**

*(To be used for Individual Volunteer positions (excluding Walk-in/One-time Event Volunteers and Commission Member positions)  
Please note that the City's ability to place you as a volunteer is dependent on the availability of assignments that match your desired assignment(s), skill(s), and/or availability as noted on Attachment A to this application. Thank you.)*

**POSITION**

TYPE/AREA OF VOLUNTEER WORK DESIRED (e.g., Office, maintenance): \_\_\_\_\_

**PERSONAL DATA**

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME TELE.: ( ) \_\_\_\_\_ CELL: ( ) \_\_\_\_\_ WORK\*: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_ \* **MAY WE CONTACT YOU AT WORK? YES / NO**

**SPECIAL SKILLS THAT MAY BE UTILIZED IN YOUR VOLUNTEER DUTY**

*(We ask for this information to make your volunteer experience as meaningful as possible to both you and the City. The City does not require that you possess certain skills to be considered, but placement is dependent on how your skills match available volunteer opportunities.)*

Business machines (other than computers) you can operate: (circle) **Fax Copier Multi-line phones 10-Key**

**Calculator Other:** \_\_\_\_\_

Are you experienced in typing meeting minutes from a tape? (circle) **YES / NO**

Do you have Computer Experience? (circle) **YES / NO** If "YES," overall skill level: **Beginner Intermed Advanced**

What computer software are you familiar with? (List with skill level) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other skills/hobbies/special knowledge that may be utilized during the course of your volunteer duty: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VOLUNTEER REFERENCES**

Are there any places of employment or volunteerism that we may call as a reference? If so, please list below:

ORGANIZATION NAME \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Supervisor Name** \_\_\_\_\_ **Supervisor Phone** \_\_\_\_\_

Hrs/Wk \_\_\_\_\_

REASON FOR LEAVING/DESIRE TO LEAVE \_\_\_\_\_

PRIMARY DUTIES \_\_\_\_\_

ORGANIZATION NAME _____	FROM _____	TO _____
Address _____	City _____	State _____ Zip _____
Supervisor Name _____	Supervisor Phone _____	
Hrs/Wk _____		
REASON FOR LEAVING/DESIRE TO LEAVE _____		
PRIMARY DUTIES _____		

*If you do not have two places of employment or volunteerism that you may use as a reference, please list two personal references (who are not relatives) that we may call on:*

NAME _____	Relationship _____
Address _____	City _____ State _____ Zip _____
Phone _____	

NAME _____	Relationship _____
Address _____	City _____ State _____ Zip _____
Phone _____	

**GENERAL**

Do you possess a valid Washington Driver's License? \_\_\_\_\_ *or another state license (name state)?* \_\_\_\_\_  
 If hired, can you provide proof of U.S. citizenship, visa or alien registration #? \_\_\_\_\_  
 List any relatives employed by the City and their relationship \_\_\_\_\_

The City of Covington considers a volunteer's conviction record as it relates to their assignment, as entitled under the law. A conviction record will not disqualify you for volunteerism, unless such record would reasonably affect your fitness for the volunteer assignment for which you have applied. The City will perform background checks through Averty.com on all applicants for volunteer positions other than Walk-in/One-time Event Volunteers that perform for a short-term duration under City staff supervision. If offered a volunteer assignment, you will be asked to complete an online background check that will need to provide acceptable results prior to the assignment becoming effective.

*"I certify that all statements in this application are true and correct to the best of my knowledge. I understand that falsification of information on this application may be cause for elimination from the volunteer selection process and dismissal from volunteerism, if participation has already begun. Additionally, I authorize the City of Covington to solicit information regarding my character, general reputation, previous volunteerism or employment, work-related skills, and similar background information, and to contact former employers or agencies I have volunteered at, unless specified to the contrary. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages, for any reason, arising out of the furnishing of such information. Consent is granted for the City of Covington to furnish this information to third parties in the course of fulfilling its official responsibilities. For this purpose, a copy of this signed authorization is as effective as the original."*

\_\_\_\_\_  
 VOLUNTEER SIGNATURE

\_\_\_\_\_  
 DATE

**ATTACHMENT A**

**CITY OF COVINGTON**

**VOLUNTEER PREFERENCES WORKSHEET**

*(The City greatly appreciates the contribution that volunteers make to the Covington community, as well as to City staff. Every effort will be made to place a volunteer applicant, depending on how the applicant matches City needs. If no immediate match may be found, the Personnel Division will retain volunteer applications for a period of one year.)*

➤ **Please give your current status (student, employed worker, unemployed worker, retired, homemaker):**

\_\_\_\_\_

➤ **If you are not applying for a specific, advertised volunteer position, what type of assignments would you be willing to undertake (please check all that are appropriate in the table, below):**

Office Assistance	PUBLIC WORKS: Maintenance Operations & Emergency Management	PARKS & REC: Parks, Aquatics & Recreation
<input type="checkbox"/> Computer <input type="checkbox"/> Data entry <input type="checkbox"/> Filing/archives <input type="checkbox"/> Research <input type="checkbox"/> Organizing/Straightening <input type="checkbox"/> Reception Desk (Greeting and directing visitors) <input type="checkbox"/> Telephone  <input type="checkbox"/> General office (May include all the above)  <input type="checkbox"/> Other: _____ _____ _____	<input type="checkbox"/> Project Management  <input type="checkbox"/> General Maintenance (no power tools) <input type="checkbox"/> Landscape Maintenance (without any power tools) <input type="checkbox"/> Landscape Maintenance (using simple power tools)  <input type="checkbox"/> Emergency Management Office Assistance (this requires Office Assistance duties) <input type="checkbox"/> Emergency Management Team Member (requires Attendance at monthly Meetings)  <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Parks Renovation Project, using: <input type="checkbox"/> No Power Tools <input type="checkbox"/> Simple Power Tools  <input type="checkbox"/> Instructor (Class type: _____) <input type="checkbox"/> Instructor's Assistant (Class type: _____) <input type="checkbox"/> Youth (coach, chaperone, etc.)  <b>What Age Group Affected:</b> <input type="checkbox"/> Preschool age <input type="checkbox"/> Teens (tutor, chaperone, etc.) <input type="checkbox"/> Adults <input type="checkbox"/> Seniors <input type="checkbox"/> Other: _____

➤ **Please list any accommodation you need to perform volunteer duties, if applicable:**

\_\_\_\_\_

➤ **How often do you want to volunteer? (Example: "Once a week," "Twice a week," "Once every other week," etc.)** \_\_\_\_\_

➤ **In order that we may best fit you into the schedule, please "X" the all time slots you would be available to volunteer on the chart below:**

	Mon	Tues	Wed	Thurs	Fri	Sat.
Morning						
Afternoon						
Approx. # of hrs./day						