



**CITY OF COVINGTON, WASHINGTON**  
**VOLUNTEER APPLICATION FOR YOUTH COUNCIL ADULT LEADERS**

16720 SE 271<sup>st</sup> Street, Suite 100, Covington, WA 98042

Telephone: 253-480-2400; Fax: 253-480-2401

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Home Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_

(Zip Code) \_\_\_\_\_ Personal Email: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Personal Cell Phone: \_\_\_\_\_

Length at current residence: \_\_\_\_\_ years \_\_\_\_\_ months

Do you reside in the **Covington** city limits? \_\_\_yes \_\_\_no \_\_\_not sure

If no, do you reside within a **three-mile radius of Covington** city limits? \_\_\_yes \_\_\_no \_\_\_not sure

Employer's Name (if applicable): \_\_\_\_\_

Employment Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_

(State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Length at current employer: \_\_\_\_\_ years \_\_\_\_\_ months

Occupation: \_\_\_\_\_ Business Email: \_\_\_\_\_ (optional)

Is your employment located inside **Covington** city limits? \_\_\_yes \_\_\_no \_\_\_unsure

Work Telephone: \_\_\_\_\_ (optional) Work Cell Phone: \_\_\_\_\_ (optional)

Education: \_\_\_\_\_

**Community Related Activities or Volunteer Experience:**

Name of Organization: \_\_\_\_\_; Length of Service: \_\_\_\_\_

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Skills/Special Interests/Experience Related to Volunteer Positions Applied for: \_\_\_\_\_

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Why are you seeking this appointment? \_\_\_\_\_

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Would any conflict of interest be created as a result of your appointment?  yes  no  unsure

If yes, please explain: \_\_\_\_\_

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**References:**

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_; Occupation: \_\_\_\_\_; Years Known: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_; Occupation: \_\_\_\_\_; Years Known: \_\_\_\_\_

How did you hear about this opening?  Reporter Newspaper  City Website  Facebook  
 Letter from Staff  Email Announcement  School  Other: \_\_\_\_\_

**NOTICE OF CITY'S INTENT TO DO CRIMINAL BACKGROUND CHECK UPON OFFER AND ACCEPTANCE OF VOLUNTEER ASSIGNMENT:** Prior to starting a volunteer assignment, the City of Covington will consider the volunteer's conviction record (if any exists) as it relates to their assigned duties, 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 position for which you have applied. If and when offered volunteer assignment for the Youth Council by the city, the city will require that you complete a "Criminal History Disclosure Statement & Authorization for Release of Information" and an online nationwide criminal background check.

*"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."*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_