



# City of Tualatin Volunteer Application

## Contact Information Please note: Applicant must be at least 14 to participate.

|                          |             |
|--------------------------|-------------|
| Name:                    |             |
| Street Address:          |             |
| City, State, Zip:        |             |
| Home Phone:              |             |
| Cell Phone:              | Work Phone: |
| E-Mail Address:          |             |
| Birth Date (MM/DD/YYYY): |             |

## Availability – Times you are available for volunteer assignments

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Weekday mornings   | <input type="checkbox"/> Weekend mornings   | <input type="checkbox"/> Long-term (more than 6 months)    |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons | <input type="checkbox"/> Short-term (less than 6 months)   |
| <input type="checkbox"/> Weekday evenings   | <input type="checkbox"/> Weekend evenings   | <input type="checkbox"/> Special Events / One-time Project |

## Interest – Check all volunteers areas that interest you

|   |  |  |
|---|--|--|
| <input type="checkbox"/> Advisory Committee/Board | <input type="checkbox"/> Environment/Tree Planting       | <input type="checkbox"/> Leadership                |
| <input type="checkbox"/> Arts and Crafts          | <input type="checkbox"/> Events and Programs             | <input type="checkbox"/> Library: Check-in         |
| <input type="checkbox"/> Children's Programs      | <input type="checkbox"/> Juanita Pohl Center: Activities | <input type="checkbox"/> Library: Shelving         |
| <input type="checkbox"/> Clerical                 | <input type="checkbox"/> Juanita Pohl Center: Gift Shop  | <input type="checkbox"/> Reception Desk            |
| <input type="checkbox"/> Data Entry/Computers     | <input type="checkbox"/> Juanita Pohl Center: Library    | <input type="checkbox"/> Specific Project(s) _____ |

## Special Skills or Qualifications/Previous Volunteer Experience

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. (Please use space on back as needed.)

## Person to Notify in Case of Emergency

|            |            |              |  |
|------------|------------|--------------|--|
| Name       |            | Relationship |  |
| Home Phone | Cell Phone | Work Phone   |  |

## Agreement and Signature

I hereby certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for on this application is cause for cancellation of the application and/or dismissal from volunteer service. I understand that background or security checks will be conducted as deemed necessary. I authorize the City of Tualatin to make any necessary and appropriate investigations to verify the information contained herein. I give permission for my photo to be taken while volunteering and that photos can be published.

|   |      |
|---|------|
| Name (printed)                              |      |
| Signature                                   | Date |
| Signature of Parent or Guardian if under 18 | Date |

## Return Application to Volunteer Services

Janet Newport, Volunteer Services Manager  
 City of Tualatin | Administration  
 18880 SW Martinazzi Avenue  
 Tualatin, OR 97062-7092  
 Phone: 503.691.3021 | Fax: 503.692.542