



CITY OF KETTERING

Volunteer Application

BASIC VOLUNTEER DATA

A. GENERAL INFORMATION

Name: _____

Address: _____

Have you lived at this address for five years? YES ____ NO ____

If not, please list previous address: _____

Phone No. _____ Work Phone No. _____

Cell/Other _____ E-Mail Address _____

Criminal Record? Have you ever been convicted of a felony? YES ____ NO ____ (If yes, explain circumstances. Existence of a criminal record does not constitute an automatic bar to volunteering.) _____

State here any additional information required to answer the above question adequately or that you feel would be helpful for volunteer inquiry. _____

Are you related to any City employee(s)? YES ____ NO ____

If so, who is the City employee? _____

What is the relationship? _____

B. EDUCATION AND TRAINING

Check the highest school grade completed.

High School

9 10 11 12

College

13 14 15 16 17 18 19 20

Degrees obtained or areas of study: _____

List any job-related schools attended or vocational training received: _____

C. EMPLOYMENT HISTORY

Are you currently employed? Yes No

If yes, please list your employer.

Current Occupation: _____

If no, please list your former employer.

Former Occupation: _____
From _____ To _____

Please list below any volunteer work experience you would like to include:

D. MISCELLANEOUS INFORMATION

Why do you want to volunteer for the City of Kettering?

How did you hear about the Volunteer Program?

Is there a specific department in which you would like to volunteer?

**E.
REFERENCES
(Relatives are not acceptable references)**

Name & Title	Occupation	Phone
1.		
2.		

CERTIFICATION: I hereby certify that all the information I have provided on ALL PAGES of this application form is true, complete and correct to the best of my knowledge and belief, and is made in good faith. I agree and understand that all statements made by me are subject to being investigated for verification. I further agree and understand that any omissions or misstatement of facts contained in this application may disqualify me for further consideration as a volunteer or result in my immediate termination with the City of Kettering.

Signature of Applicant

Date

**EQUAL OPPORTUNITY
EMPLOYER**

As an Equal Opportunity Employer, the City of Kettering is committed to give equal consideration to all applicants without regard to race, color, religion, gender, age, national origin, ethnic heritage, or disability.

EMERGENCY INFORMATION

In case of emergency, please contact:

Name: _____

Phone: _____ Cell Phone: _____

AVAILABILITY

Please check the hours you are usually available to volunteer:

Monday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Tuesday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Wednesday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Thursday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Friday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Saturday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight
Sunday	<input type="checkbox"/> 8 a.m. – Noon	<input type="checkbox"/> Noon – 5 p.m.	<input type="checkbox"/> 5 p.m. – Midnight

SKILLS

Below is a list of our City volunteer opportunities. Please check those that interest you:

- | | |
|---|--|
| <input type="checkbox"/> Baker (Senior Center) | <input type="checkbox"/> Mail Courier |
| <input type="checkbox"/> Bingo (Senior Center) | <input type="checkbox"/> Martial Arts Assistant |
| <input type="checkbox"/> Children's Theatre Assistant | <input type="checkbox"/> Nutrition Program (Senior Center) |
| <input type="checkbox"/> Christmas Open House (Polen Farm) | <input type="checkbox"/> Open/Sort Mail |
| <input type="checkbox"/> Citizen's Police Academy | <input type="checkbox"/> Parks Maintenance Assistant |
| <input type="checkbox"/> Collate Documents/Mailings | <input type="checkbox"/> Photographer |
| <input type="checkbox"/> Compile Statistics | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Courier (Vehicle Maintenance Center) | <input type="checkbox"/> Receptionist |
| <input type="checkbox"/> Crafts (Senior Center) | <input type="checkbox"/> Scanning |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Schedulers |
| <input type="checkbox"/> Drivers (Senior Center) | <input type="checkbox"/> Senior Transportation |
| <input type="checkbox"/> Environmental Education Assistant | <input type="checkbox"/> Show Choir (Senior Center) |
| <input type="checkbox"/> Frazee Usher | <input type="checkbox"/> Special Events Assistant |
| <input type="checkbox"/> Gardener | <input type="checkbox"/> Summer Camps Assistant |
| <input type="checkbox"/> Greeter | <input type="checkbox"/> Tax Assistant |
| <input type="checkbox"/> Gym Attendant | <input type="checkbox"/> Ukulele Band (Senior Center) |
| <input type="checkbox"/> Ice Skating Assistant | <input type="checkbox"/> Youth Sports Coach |
| <input type="checkbox"/> Kitchen Band (Senior Center) | |

Please return completed application and background release form to:



City of Kettering
Volunteer Office
3600 Shroyer Road
Kettering, OH 45429 or
e-mail

marylou.randolph@ketteringoh.org

(over)



CITY OF KETTERING

VOLUNTEER BACKGROUND RELEASE FORM (PLEASE PRINT CLEARLY)

Name: _____ Address: _____

State: _____ Zip: _____ Social Security No.: _____ Contact Phone No.: _____

Date of Birth: _____

Driver's License No.: _____ State*: _____ Exp. Date: _____

*Applicants with out-of-state driver's licenses must provide a copy of a current driving record.

Valid License: Yes No Type of License: Operator's Commercial (CDL)

I authorize the City of Kettering and any investigative agency of its choice to investigate my personal history, character and general reputation as it substantially relates to the duties and responsibilities of the volunteer position(s) for which I am applying...

I authorize any reference, school, former employer, military organization, police department or other person or agency to disclose to the City of Kettering or its agent, upon request, any information or records they may have about me and I release them from all liability for disclosing such information to the City of Kettering.

Photo Consent

I hereby grant City of Kettering permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the City of Kettering and will not be returned.

Acknowledgement of Risks

I understand, acknowledge, agree and accept full responsibility for all the risk of the activities I am voluntarily engaged in as a participant and/or spectator. I agree, covenant and promise to accept and assume total responsibility. I understand and acknowledge that I will not be provided with any medical insurance.

Applicant Signature

Date

Requested By

Date

City of Kettering Police Department Signature