City of Carmel-by-the-Sea POST OFFICE BOX CC CARMEL-BY-THE-SEA, CA 93921 (831) 620-2000

To all interested Volunteers:

On behalf of the staff at the City of Carmel-by-the-Sea, we thank you for your interest in our volunteer program.

We believe that volunteering gives people an opportunity to change lives, others as well as your own. It's estimated that in 2007, 6.3 million volunteers dedicated 877.9 million hours of service valued at more than \$17 billion to the California economy.

We feel very lucky that you have chosen the City of Carmel-by-the-Sea.

Attached is our Volunteer Application Form. Please answer all questions on the application thoroughly. A complete application will allow us to promptly process your request to become a Volunteer with the City. When complete, please return your application to our office at the City Hall Offices on Monte Verde between Ocean & 7th Street.

Volunteering takes many forms and is performed by a wide range of people. After review of your completed application, we will be contacting you to see how you can best serve the City of Carmel-by-the-Sea.

Thank you again for your interest!



City of Carmel-by-the-Sea Volunteer Application EOE

I'm applying as Volunteer With the _____

_ Dept.

Full time () Part time ()

Seasonal ()

PLEASE PRINT

Last Name	First Name	MI	Best Phone Conta	ct #		
Address			City	State Zip		
Why are you interested in volunteering with the City of Carmel-by-the-Sea?						
Have you ever volunteered before? Please detail your experience (organization/supervisor/duties assigned).						
When are you available to volunteer Monday Tuesday			Thursday	Friday		
Hours per week (#) T	imes Available: Morning		Afternoon	Evening		
Are you currently employed: Yes () No () If Yes, may we contact your supervisor Yes () No () If Yes, please provide: If Yes, may we contact your supervisor Yes () No ()						
Job Title Name & Phone of Supervisor						
What Computer programs can you operate proficiently?						
What are your hobbies or special interests?						
Circle Last year completed for: Elementary: 1 2 3 4 5 6 7 8 High School: 1 2 3 4 Degree: 1 2 3 4 Degree: 1 2 3 4 5 6 7 8 High School: 1 2 3 4 College: 1 2 3 4 Degree: 1 2 3 4 Specialty/Trade School: 1 2 3 4 5 6 7 8 Specialty/Trade School: 1 2 3 4 5 6 7 8 Specialty/Trade School: 1 2 3 4 5 6 7 8 Specialty/Trade School: 1 2 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3						
ADDITIONAL INFORMATION						
All individuals age <i>18 years and older</i> , working in law enforcement or any position that is sensitive (involving children or confidential material) to be fingerprinted. Do you authorize the completion of a Live Scan Fingerprint? () Yes () No						
Are you legally authorized to work	in the United States?			() Yes () No		
Note: If selected for a volunteer assignment, you will be required to show proof of legal right to work in the United States						
Have you ever been convicted of a misdemeanor or felony, been on parole or probation? () Yes () No If Yes, please explain (a conviction will not necessarily result in denial) () Yes () No						
List all other languages besides English that you speak fluently.						
CERTIFICATE OF APPLICANT						
I certify that the information I had knowingly withheld any fact or co- understand any or all information signing below, I authorize you to co- whom you desire to check. I agree If hired as a Volunteer, I agree to b- its insured, and its agents which ma	ircumstance that would if dise on this application is subject ommunicate with persons listed to hold such persons harmless w hold in strictest confidence any	closed to ver as re vith re	subject me to dis ification by the Ci ferences, former er spect to any inform	qualification or dismissal. I ty of Carmel-by-the-Sea. By nployers, and any others with ation they may give about me.		
Signature Date						



City of Carmel-by-the-Sea Volunteer Application Part 2

REFERENCES							
Please provide three non-family members who can provide references on your ability to perform this volunteer position.							
Name:	Name:		Name:				
Address:	Address:		Address:				
Phone:	Phone:		Phone:				
Years known:	Years known:		Years known:				
EMERGENCY CONTACT							
Last Name First	Phone Number						
Address Number Street	Apt #	City	State Zip				
FINGERPRINTS							
The City of Carmel-by-the-Sea is required by law to have all individuals age 18 years and older, working in law							
enforcement or any position that is sensitive (involving children or confidential material) to be fingerprinted. If you are							
applying as a volunteer in any of these areas, you are required to complete a background check via Live Scan fingerprint.							
LIVE SCAN services are available at the Carmel Police Department and will be paid by the City of Carmel-by-the-Sea.							
Please indicate you understand the importance of this law and authorize the completion of a Live Scan background check.							
Authorization Signature	Authorization Signature Date						
CITY OF CARMEL-BY-THE-SEA DECLARATION							
The City of Carmel-by-the-Sea prohibits discrimination against or harassment of any employee/volunteer or seeking							
employment/volunteer position with the City on the basis of race, color, national origin, religion, sex, gender identity,							
pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), ancestry, marital							
status, age, sexual orientation, citizenship, or service in the uniformed services (as defined by the Uniformed Services Employment and Reemployment Rights Act of 1994).							
City policy also prohibits retaliation against any employee/volunteer or person seeking employment/volunteer position for							
bringing a complaint of discrimination or harassment pursuant to this policy, or against a person who assists someone with							
a complaint of discrimination or harassment, or who participates in any manner in an investigation or resolution of a							
complaint of discrimination or harassment.							
The City of Carmel-by-the-Sea is an affirmative action/equal opportunity employer. The City undertakes affirmative							
action to assure equal employment opportunity for minorities and women, for persons with disabilities, and for covered							
veterans.							
CERTIFICATE OF APPLICANT							
I certify that the information I have provided is true, complete and correct to the best of my knowledge. I have not							
knowingly withheld any fact or circumstance that would if disclosed subject me to disqualification or dismissal. I							
understand any or all information on this application is subject to verification by the City of Carmel-by-the-Sea. By							
signing below, I authorize you to communicate with persons listed as references, former employers, and any others with							
whom you desire to check. I agree to hold such persons harmless with respect to any information they may give about me.							
If hired as a Volunteer, I agree to hold in strictest confidence any information concerning the City of Carmel-by-the-Sea,							
its insured, and its agents which may come to my knowledge.							
Signature Date							
		Duit					