

PASO ROBLES LIBRARY VOLUNTEER APPLICATION

1000 Spring Street, Paso Robles, CA 93446
(805)237-3870, srobitaille@prcity.com

INSTRUCTIONS

Please type or print in ink. You may return completed application to the address listed above, either by mail or hard copy.

Volunteer Position You Are Applying For:

Last Name	First Name	M.I.	Other names you have used or have been known by
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Mailing Address	City	State	Zip Code
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Driver License Number	State	Expiration	Class	Phone Number	Email Address
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Please check the days and times you are available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Additional information regarding availability:

Have you ever volunteered or worked for the City of Paso Robles? Yes No

If yes, which position(s) and when: _____

Do you have any relatives working for the City of Paso Robles? Yes No

If yes, state name(s) and relationship(s): _____

Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed: _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for the eligible applicants to perform essential functions. Applicant may be subject to passing a medical examination, and/or skill and agility tests.)

EDUCATION AND TRAINING

List your education and training related to the position:

School Name	Location (City and State)	Degree/Certificate	Major	Date Awarded

Do you speak, write, or understand any foreign languages? Yes No

If yes, which language(s)? _____

MOST RECENT VOLUNTEER AND EMPLOYMENT HISTORY

NAME OF EMPLOYER OR VOLUNTEER ORGANIZATION	TYPE OF BUSINESS	HOURS PER WEEK
ADDRESS	NAME AND TITLE OF SUPERVISOR	MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No
PHONE NUMBER	REASON FOR LEAVING	
DATES EMPLOYED OR VOLUNTEER SERVICE	DESCRIPTION OF DUTIES	
JOB TITLE		

MOST RECENT VOLUNTEER AND EMPLOYMENT HISTORY (continued)

NAME OF EMPLOYER OR VOLUNTEER ORGANIZATION	TYPE OF BUSINESS	HOURS PER WEEK
ADDRESS	NAME AND TITLE OF SUPERVISOR	MAY WE CONTACT <input type="checkbox"/> Yes <input type="checkbox"/> No
PHONE NUMBER	REASON FOR LEAVING	
DATES EMPLOYED OR VOLUNTEER SERVICE	DESCRIPTION OF DUTIES	
JOB TITLE		

PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH, AND SIGN BELOW

_____ I hereby certify that answers given by me are true and correct to the best of my knowledge and that I have personally completed this application. Any false or misleading information in connection with any aspect of the application process shall be grounds for refusal of acceptance for a position and/or dismissal from a volunteer position with the City of Paso Robles.

_____ I hereby authorize the City of Paso Robles to contact my references and former employers I have listed and I release the City, my former employers, my former managers, supervisors, and co-workers from any and all liabilities arising out of or in any way related to such investigation or disclosure.

_____ Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the City, I am entitled to copies of any such public record obtained by the City unless I mark the check box below. If I am not accepted as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

_____ I agree to comply with the City of Paso Robles' rules and regulations to the best of my ability. I agree to respect the confidential nature of information I may obtain, to participate in orientation and training as required by my assignment, and to allow publication of my photo in promotional materials for the City of Paso Robles, including but not limited to, the City website and/or publications.

Applicant's Signature _____

Date _____

WHERE DID YOU LEARN OF THIS VOLUNTEER POSITION?City of Paso Robles Related

- City Website
- City Newsletter
- City Employee
- City Volunteer
- City Flyer
- City Hall Visit

Online

- Facebook
- Twitter
- Craigslist
- Other website (please specify)

Publications

- Tribune
- Paso Robles Daily News
- Other Publication (please specify)

Other

- Friend or Relative
- Other: _____