



VOLUNTEER PROFILE

What volunteer position are you applying for (if unknown, what are your interests)?

How did you learn about this program? _____

Name _____
(Last, first, m.i.)

Address _____

Phone number(s) _____ email address _____

Days and times available

| TIME | MON | TUES | WED | THURS | FRI | SAT | SUN |
|-----------|-----|------|-----|-------|-----|-----|-----|
| MORNING | | | | | | | |
| AFTERNOON | | | | | | | |
| EVENING | | | | | | | |

What commitment can you make to volunteering (check appropriate box)?

- 3 months 6 months Longer Undecided

Is there any condition that will interfere with performing the essential duties of the position? Yes ___
No ___

If yes, please describe _____

Current employer _____ Phone number _____
Position _____

Previous Volunteer Experience

Where? _____

When? _____

Are you bilingual? _____ What language(s)? _____

Special skills/training _____

In case of emergency please notify _____
(Name and relationship)

Phone number(s) _____

PLEASE READ AND SIGN

I certify that all statements made in this application are true and complete.

Signature _____ Date _____

The City of Federal Way is an equal opportunity employer committed to a diverse workplace. For ADA accommodations please advise the City of the need. For TDD relay service call 1-800-833-6388. or in metro Seattle, call 587-5500. Both numbers are TDD and voice.

FOR OFFICE USE ONLY

Interviewer Name/Department _____

Interview Date ___/___/___ Date Waiver Signed ___/___/___ Date WATCH Check Completed ___/___/___

Volunteer accepted? Y ___ N ___ Date Started ___/___/___ Date Terminated ___/___/___

Reason for Termination _____

General Comments: