



City of Rio Vista Volunteer Application Form

1 Main Street
Rio Vista, CA 94571
www.riovistacity.com

This form must be completed by anyone who wishes to volunteer for the City of Rio Vista.

Volunteer Position: _____ Date: _____

PERSONAL INFORMATION

Full Name _____
Last First Middle Initial

Address _____
Street City State Zip

Home Phone _____ Work Phone _____ Other Phone _____

Email Address _____

Valid CA Driver License? Yes ___ No ___ License Number _____ Expiration _____

EDUCATION

High School attended: _____

College: _____ Major: _____

Licenses or Certifications, which are related to the position for which you are applying:

REFERENCES

Please list three persons acquainted with your capabilities – **NOT RELATIVES**

Name Address Daytime Phone Evening Phone

INTERESTS

Please check all that apply:

- | | | |
|---|--|---|
| <input type="checkbox"/> Administrative Tasks | <input type="checkbox"/> Computer Input / Data Entry | <input type="checkbox"/> Filing |
| <input type="checkbox"/> Phone Support | <input type="checkbox"/> Typing | <input type="checkbox"/> Word Processing |
| <input type="checkbox"/> Website Support | <input type="checkbox"/> Video Operations | <input type="checkbox"/> Recreational Support |
| <input type="checkbox"/> Senior Center | <input type="checkbox"/> Other | |

Volunteer Experience: _____

TIME PERFORMANCE

- | | | |
|--|---|---|
| <input type="checkbox"/> One time project | <input type="checkbox"/> Regular Hours | <input type="checkbox"/> Five hours per month |
| <input type="checkbox"/> Ten hours per month | <input type="checkbox"/> 20 hours per month | <input type="checkbox"/> Other |

WORK EXPERIENCE

Employer _____ Address _____

Dates Employed: From: _____ To: _____ Total Time Years ___ Months ___ Hours per week _____

Title _____ Telephone _____ May we contact? _____

Duties _____

Employer _____ Address _____

Dates Employed: From: _____ To: _____ Total Time Years ___ Months ___ Hours per week _____

Title _____ Telephone _____ May we contact? _____

Duties _____

Have you ever been convicted of any offense(s) other than a driving violation? Yes ___ No ___

If yes, list offense(s) and date(s) of convictions on another sheet of paper and attached to application. A yes answer does not necessarily disqualify.

Were you ever terminated or forced to resign a position? Yes ___ No ___ If yes, list details on a separate sheet of paper and attached to application. This answer will not necessarily result in disqualification.

Official Use Only:

Contingencies prior to placement: ___ Background Check ___ Drug Screen ___ Livescan