



City of San Diego Park and Recreation Department Individual Volunteer Application



Position Applying for (Optional): _____

Court Mandated volunteers must complete the *Court-Referred Volunteer Application* available at: www.sandiego.gov/park-and-recreation/general-info/volunteer.shtml

Personal Information

Name: _____
Last First Middle

Address: _____
Street City State Zip

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

E-Mail address: _____ Fax: (____) _____

Date of Birth (Optional): ____/____/____ Male Female

Current Occupation: _____

Experience/Skills/ Certificates/Certifications

Have you served as a City of San Diego Park and Recreation Department Volunteer? Yes No

Please describe your education, employment and volunteer background/experiences that you feel may contribute to the City of San Diego Park and Recreation Department Volunteer Program (you may attach a resume):

Languages Spoken, Read or Written: _____

Hobbies/Interests: _____

Special skills/ certificates/ certifications: _____

What inspired you to pursue a Volunteer position with the Park and Recreation Department Volunteer Program, what do you hope to gain, as well as contribute:

Availability/References

What geographic area(s) would you like to volunteer in? (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Downtown/Balboa Park | <input type="checkbox"/> Tecolote Canyon/Serra Mesa | <input type="checkbox"/> Allied Gardens/San Carlos |
| <input type="checkbox"/> Old Town | <input type="checkbox"/> Clairemont/Linda Vista/ Kearny Mesa | <input type="checkbox"/> College Area |
| <input type="checkbox"/> Golden Hill/Stockton | <input type="checkbox"/> Rancho Bernardo | <input type="checkbox"/> Mission Trails |
| <input type="checkbox"/> La Jolla | <input type="checkbox"/> Carmel Valley/Sabre Springs | <input type="checkbox"/> Paradise Hills/Skyline |
| <input type="checkbox"/> Pacific Beach | <input type="checkbox"/> Mira Mesa/Scripps Ranch | <input type="checkbox"/> Encanto |
| <input type="checkbox"/> Ocean Beach/Point Loma | <input type="checkbox"/> North Park/Hillcrest | <input type="checkbox"/> Southcrest/Mt. View |
| <input type="checkbox"/> Mission Bay | <input type="checkbox"/> City Heights | <input type="checkbox"/> South Bay/San Ysidro |

List any physical or health restrictions that might impact your work as a volunteer: _____

I am able to begin on ____/____/____ and will be available on the following days and times

Monday ____:____ am/pm to ____:____ am/pm Tuesday ____:____ am/pm to ____:____ am/pm
Wednesday ____:____ am/pm to ____:____ am/pm Thursday ____:____ am/pm to ____:____ am/pm
Friday ____:____ am/pm to ____:____ am/pm Saturday ____:____ am/pm to ____:____ am/pm
Sunday ____:____ am/pm to ____:____ am/pm

Please list three personal or professional references:

1 _____ (____) _____
Name Relationship Phone

Street address City State Zip

2 _____ (____) _____
Name Relationship Phone

Street address City State Zip

3 _____ (____) _____
Name Relationship Phone

Street address City State Zip

How did you hear about the Park and Recreation Department's Volunteer Program?

- City Employee
- School Bulletin/Flyer
- City of San Diego Website _____
- Friend /Relative
- Volunteer San Diego Website
- Employer _____
- Association with the program _____
- Volunteer Fair _____
- Other _____

NOTICE TO APPLICANTS INTERESTED IN WORKING WITH YOUTH: Thank you for submitting an application to the Park and Recreation Department Volunteer Program. To support the safety of our community and comply with State Law -- **ALL volunteers 13 years of age and older having direct contact with minors and people with disabilities will not be scheduled to volunteer until a criminal records check through the California Department of Justice and fingerprinting process is complete.**

I understand that as a volunteer I am representing the City of San Diego and will adhere to program guidelines.
Applicant's signature _____ Date ____/____/____
Volunteers who are minors, 17 years of age and under, must have parental/legal guardian consent prior to volunteering.
Parent/Legal Guardian's signature _____ Date ____/____/____

For more information, please visit www.sandiego.gov/park-and-recreation/ or contact the Park and Recreation Department Volunteer Office at (619) 533-4017.

Return application to volunteer site of interest or to main office:
City of San Diego
Park & Recreation Department -Volunteer Office
202 C Street, MS 804C, San Diego, CA 92101

Or fax to Park & Recreation Department Volunteer Office at (619) 525-8224

Office Use Only Date Started ____/____/____
Site: _____ On Site Supervisor: _____