



**VOLUNTEER APPLICATION**

**City of Oakland Park • Human Resources**  
 3650 NE 12 Avenue • Oakland Park • Florida 33334  
 Phone (954) 630-4313 • Fax (954) 630-4323 • email: [www.oaklandparkfl.org](http://www.oaklandparkfl.org)

The **City of Oakland Park Community Volunteer Program** provides an opportunity to assist with special events, hurricanes and other disasters that impact the quality of life of our residents. The City of Oakland Park appreciates your interest in volunteering. Filling out this application is the first step in turning your talents and skills into positive action within the community.

**PLEASE PRINT**

**MR./MS. Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone:** (\_\_\_\_) \_\_\_\_\_ **Work Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_

**Are you under the age of 18?** \_\_\_\_ Yes \_\_\_\_ No

**I am interested in participating in activities related to hurricane recovery** \_\_\_\_ Yes \_\_\_\_ No

**Days/Times you are available to volunteer:**

	MON	TUE	WED	THUR	FRI	SAT	SUN
AM							
PM							

**Length of time you are available (1 month, 6 months, indefinite):** \_\_\_\_\_

**VOLUNTEER OPPORTUNITIES: (Check all that apply)**

- Special Event Support ( )
- Athletic Programming Coaches ( )
- Waterway & Park Cleanups ( )
- National Wildlife Committee ( )
- Concession Stand ( )
- Summer Recreation Attendants ( )
- Library Support ( )
- Active Adults Seminars/Programs ( )
- Kiwanis Tennis Tournament ( )
- Tree Giveaways ( )
- Tree Plantings & Landscape Projects ( )
- CERT (Community Emergency Response Team) ( )

**PLEASE INDICATE HOW YOU LEARNED ABOUT THE VOLUNTEER PROGRAM:**

- Cable TV (City Access) ( )
- Volunteer/Job Fair ( )
- Community Presentation/Event ( )
- Newspaper ( )
- Volunteer Hotline ( )
- City of Oakland Park Website ( )
- AM Radio Station ( )
- Referral ( )
- Other ( ) \_\_\_\_\_

**BRIEFLY DESCRIBE RELEVANT WORK AND/OR VOLUNTEER EXPERIENCE:** \_\_\_\_\_

**EDUCATIONAL BACKGROUND:** \_\_\_\_\_

**EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

**REFERENCES:** (other than relatives)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A FELONY? :**  Yes  No Type: \_\_\_\_\_ Year \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



## **AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

**In order to uphold our high standard of excellence, we carefully select the volunteers who will be assisting us in the City. Therefore we will conduct a background check on each of our volunteers. This background check may include the following information:**

- National Criminal File Search
- Sexual Offender/Predator Check (if you are working with children or the elderly)
- Driver's License Check (if requires driving a City vehicle)

I understand that any information obtained by a personal background investigation will be considered in determining my suitability for volunteer service by the City of Oakland Park. I understand that any misleading, incorrect or untruthful statements may render this application void, and if I am placed in a volunteer position, would be just cause for terminating my volunteer assignment with the City. I hereby release the City of Oakland Park, its authorized representatives, from all liability which may be incurred as a result of furnishing such information. My signature indicates that I have read and understand the information delineated in this form.

**Volunteer:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Please complete the following:**

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security#