



TOWN OF DEWEY-HUMBOLDT

Town Volunteer Application Form

The Town of Dewey-Humboldt's volunteers facilitate communications, serve the Town, and receive input from interested parties and the community at large.

Please complete this application form and thank you for your interest in serving.

Volunteer position applied for: (If interested in more than one position, indicate preference by 1, 2 or 3.)

- | | |
|---|--|
| <input type="checkbox"/> Newsletter editor or staff | <input type="checkbox"/> Neighborhood Ambassador |
| <input type="checkbox"/> Front office assistant/greeter | <input type="checkbox"/> Meeting preparation |
| <input type="checkbox"/> Filing/records | <input type="checkbox"/> Typing |
| <input type="checkbox"/> Ombudsman | |

Please indicate the times you are available to volunteer:

- Once a week Twice a week Daily Other: _____

Time Available:	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evenings					

Personal information:

Name: _____

Home Address: _____

Phone Number (please indicate home and work numbers)

Occupation

Are you a U.S. citizen? Yes No

Are you over the age of 18? Yes No

Are any of your relatives, employed by the Town? Who/Where: _____

Military Service: Branch _____ Rank _____

Length of Service: _____

Emergency Contact: _____

Name

Phone

Relationship

Educational Background/Work Skills:

High School Graduate or Passed High School Equivalency test? Yes No

College or University: _____ College Major: _____

Graduate Field, if any: _____

Fluent in a language other than English: Language _____ Speak Read Write

List License (date & #), professional registrations (date), certificates and professional memberships:

Are you presently employed? (Check as many as apply)

Employed full-time Employed part-time Unemployed Retired

Employment experience relevant to the position applied for: _____

Conditions of Volunteering:

I fully understand, acknowledge and agree to the following conditions: The program is under no obligation to accept all interested volunteers. Any or all of the following will be required before placement in all volunteer positions: (A) Fingerprinting (B) Background Investigation (C) Substance Abuse Testing All statements made in this application are true and authorization is given to investigate all matters contained in this application. Any False statement or misrepresentation on this application will be cause for refusal of placement and immediate dismissal at any time during the period of my placement. I further assert that I have sufficient time to devote to this responsibility and will attend the required meetings if appointed as volunteer.

DATE

SIGNATURE

Signature of Parent/Guardian (if volunteer is a minor):

DATE

SIGNATURE

We appreciate your interest in serving Town and will keep your application on file for two years from date of receipt.

If you have any questions about this volunteer application, please contact the Town Clerk at (928) 632-7362. Please mail the completed application to the Town of Dewey-Humboldt, Town Clerk, P.O. Box 69, Humboldt, AZ, 86329, fax to 928-632-7365, or email to townclerk@dhaz.gov.