



MUNICIPAL VOLUNTEER PROGRAM APPLICATION

Please Return to: City of Riverdale - Human Resources
6690 Church Street - Riverdale, GA 30274
Phone: (770) 909-5493 Fax: (770) 909-5275
Email: shunter@riverdalega.gov

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

We welcome you as a Municipal Volunteer applicant with the City of Riverdale. It is the policy and intent of the City of Riverdale to provide equal opportunity to all volunteer applicants regardless of race, color, gender, age, religion, national origin, ancestry, sexual orientation, marital status, veteran status, disability, or any other protected group status (except when gender, age, or physical ability is a bona fide volunteer qualification) in all aspects of our personnel and/or volunteer policies, programs, practices and operations. All information contained in or connected with this Municipal Volunteer Program application will be considered personal and confidential and used only in conjunction with your possible volunteer assignment with the City of Riverdale.

The City of Riverdale complies with the Americans with Disabilities Act (ADA). If you are an individual with a disability and require assistance or accommodation in filling out this application, please contact the Human Resources Department at (770) 909-5493.

Please furnish us with complete information as requested in this application.

GENERAL INFORMATION

Last Name _____ First Name: _____ Middle Initial: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____ County _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

Are you related to any employee or an elected official of the City of Riverdale? Yes _____ No _____

If yes, state their name and relationship to you: _____

Have you ever been employed by the City of Riverdale? Yes _____ No _____

Are you at least 18 years of age? Yes _____ No _____

Have you ever been convicted of a crime other than a petty moving violation? Yes _____ No _____

APPLICANT IS NOT OBLIGATED TO DISCLOSE SEALED OR EXPUNGED RECORDS OF CONVICTION OR ARREST.

If yes, please explain: _____

If applicable for the volunteer position, please answer the next question:

Do you have a valid Georgia Driver's License? Yes _____ No _____ DL No. and State _____

AVAILABILITY

Please identify the specific department(s) or functional areas with which you'd prefer to volunteer.

Days of the Week: _____ Hours: _____

SKILLS

List any skills/experience that might relate to a volunteer position (Data Entry, Software Skills, Equipment, etc.).

List any special courses, seminars, workshops, etc., that might relate to a volunteer position.

List any licenses or certificates relating to a volunteer position.

Describe your interpersonal skills, special training or experience you may have relating to dealing with the public.

VOLUNTEER HISTORY

May the City of Riverdale contact the organizations identified below? Yes _____ No _____

May the City of Riverdale share your e-mail address and phone number with the other members of the volunteer group?

Yes _____ No _____ If yes, please specify specific contact information: _____

Organization: _____ **Phone Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Dates Volunteered: _____ **Title:** _____ **Supervisor's Name:** _____

Duties: _____

Organization: _____ **Phone Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Dates Volunteered: _____ **Title:** _____ **Supervisor's Name:** _____

Duties: _____

PROFESSIONAL REFERENCES

Please list two references that are familiar with your work history and/or volunteer experience.

Name: _____ **Organization/Company:** _____

Relationship: _____ **Years Known:** _____ **Phone #:** _____

Name: _____ **Organization/Company:** _____

Relationship: _____ **Years Known:** _____ **Phone #:** _____

How did you learn of the volunteer opportunities with the City of Riverdale?

Newspaper

Employee

Riverdale's Web Site

Other

Name of referral source: _____

Please note that this program is not meant to satisfy court-ordered volunteer requirements.

VOLUNTEER APPLICANT AGREEMENT

Please read before signing. Questions regarding this statement should be directed to Human Resources.

I hereby certify that all answers to the questions herein are true, accurate and complete to the best of my knowledge. I agree and understand that any false statements, misrepresentations or omissions of fact contained in this application (or any other accompanying or required documents) may cause the rejection of this application without notice or benefits, regardless of how or when discovered.

I understand that all candidates offered a volunteer assignment are subject to a drug screen at the expense of the City. I authorize the investigation of all statements and information contained in this application. I release the City of Riverdale from any and all liability that might result from conducting a background investigation and from employing me as a volunteer. I also release from liability anyone supplying information pursuant to such investigation. I understand that information collected during this background check will be limited to that appropriate to determining my suitability for particular types of volunteer work and that all such information collected during the check will be kept confidential.

I understand that this application is not, nor is it intended to be, a contract of employment. If selected to as a volunteer, I agree to abide by all applicable Federal, State, and City of Riverdale's ordinances, rules, regulations, and policies either published or in effect by custom and usage. I understand that I am offering my services to the City of Riverdale without compensation. I understand the City of Riverdale may terminate my volunteer status at any time.

I am responsible for maintaining the confidentiality of all privileged and proprietary information in which I may encounter during my term as a volunteer.

I acknowledge that I have read the above statements and hereby grant permission to verify the information supplied on this application to volunteer.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____