



VOLUNTEER APPLICATION

AmeriCorps VIP Fellow

Duarte City Hall
1600 Huntington Drive, Duarte CA 91010
Hours: Mon - Thurs, 7:30am to 6pm

Phone: (626) 357-7931 Fax: (626) 358-0018
www.accessduarte.com

Name: _____
Last First Today's Date

Address: _____
Number & Street City/State ZIP

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Cell Phone: _____ Work Phone: _____

Do you have any limitations related to health or physical ability? If so, please explain:

Do you have a driver's license? Yes No _____
DL Number State of Issue Expiration Date

Do you have Auto Insurance? Yes No Do you have reliable transportation? Yes No

Special Skills/Talents: _____

Fluent Languages: _____

Age Range (optional): 18-25 26-35 36-50 51-65 66-75 76+

Is your volunteer work required? Yes No

If yes, through what organization/school: _____

Why do you want to volunteer for the City of Duarte? _____

Dates Available to Volunteer: From _____ To _____

Days/Hours Available: (example: 8am - 2pm)

Mon	Tues	Wed	Thurs	Fri	Sat	Sun

Previous Volunteer Experience: *(Attach additional sheets if necessary)*

Position: _____	Dates: _____ to _____
Name of Organization: _____	
Address: _____	
Number & Street	City/State ZIP
Name of Supervisor: _____	Title: _____
Phone Number: _____	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of your duties: _____	

Position: _____	Dates: _____ to _____
Name of Organization: _____	
Address: _____	
Number & Street	City/State ZIP
Name of Supervisor: _____	Title: _____
Phone Number: _____	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of your duties: _____	

Position: _____	Dates: _____ to _____
Name of Organization: _____	
Address: _____	
Number & Street	City/State ZIP
Name of Supervisor: _____	Title: _____
Phone Number: _____	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of your duties: _____	

List Organizations that you have volunteered for that are not included above: _____

Volunteer Name (Please Print)

**CITY OF DUARTE
VOLUNTEER AGREEMENT**

I hereby certify that all facts set forth in this application are true and complete to the best of my knowledge. I understand that if I become a volunteer, falsified statements made on this application shall be considered sufficient cause of dismissal. I further understand that becoming a volunteer may be contingent upon successful completion of a reference check and/or background investigation, including fingerprinting. I further understand that the City reserves the right to dismiss volunteers at will and that volunteers receive no monetary compensation.

I acknowledge that I have volunteered to perform the volunteer services for the City of Duarte, as specified on the attached application form, to the best of my ability and in a professional manner. I acknowledge that I am not an employee of the City of Duarte, and I may not represent myself as anything other than a volunteer for the City of Duarte.

I acknowledge that as a volunteer I must follow City policies prohibiting discrimination and harassment, be courteous with the public, maintain and exhibit a neat and clean appearance. I understand that in the course of my volunteer work I may obtain or be presented with confidential information. I agree to keep confidential any knowledge I may have relating to any confidential information of any kind. I acknowledge that all documents and other material generated by me as a volunteer are property of the City. If problems arise regarding my schedule or ability to perform services, I will notify the designated City employee as soon as possible.

I acknowledge that as a volunteer I will perform service for the City for civic, charitable, or humanitarian reasons, and without promise, expectation, or receipt of compensation for services rendered. I acknowledge that I serve-at-will and at the pleasure of the City Manager. I do not acquire any right or interest, including but not limited to any property right or interest, in the assignment, position, or task, and I may be terminated from the assignment, position, or task with the City at any time, without notice, without cause, and without appeal.

I acknowledge that as a volunteer I have no authority to bind the City and will not make any representations that I am an employee or agent of the City, and that any business cards issued to me are for the purpose of identification only. I understand that only authorized employees of the City of Duarte are allowed to make statements to the media, and I agree not to make any statements to the media concerning information I have obtained during, or as a result of my volunteer work. I agree not to access or use any resources, including but not limited to letterhead, business cards, or electronic equipment, of the City of Duarte, for unauthorized purposes.

I acknowledge that as a volunteer if I am required to drive either my personal vehicle or a City-leased or owned vehicle for the performance of volunteer services, I must provide proof of insurance and follow the City's vehicle policies, and if I am involved in a non-injury or injury motor vehicle accident while performing volunteer services, I shall report the accident to the City.

I acknowledge that the City's workers' compensation policy and public liability insurance apply to me while I perform authorized volunteer services and that I must report to the City all injuries to me occurring during the performance of such services.

In consideration of the City of Duarte furnishing facilities, supervisors, equipment or expenses, I agree to hold harmless and release the City, its officers and employees, on behalf of myself, my organization, my heirs, assignees, administrators and executors, from any and all rights and claims for damages or injuries to property and/or person which undersigned may sustain or incur as a result of use of or participation in the activities, events or property provided by the City.

Signature of Volunteer

Date

Volunteer Application is available for translation into languages other than English per request.

Solicitud de Voluntarios y formas adicionales están disponibles por petición para su traducción a otros idiomas aparte del Inglés.