



The City of
OKLAHOMA CITY
Parks & Recreation Department

**ADULT VOLUNTEER APPLICATION
CITY OF OKLAHOMA CITY
PARKS AND RECREATION DEPARTMENT**

For Volunteer office use ONLY	
Date Received	_____
Security Check Sent	_____
Security Check Rec'd	_____
Date approved copy	_____
Returned to Center	_____

This form must be completed in its entirety, using a **blue** or **black** ink pen. Please **PRINT**
CITE/PROGRAM: _____

(*) THIS INFORMATION IS REQUIRED FOR BACKGROUND CHECK. YOUR APPLICATION WILL NOT BE PROCESSED UNLESS ALL REQUIRED INFORMATION IS DISCLOSED.

*Last Name:		*First Name:		*M.I.:	*Social Security Number:
Street Address:		City:		State:	Zip Code:
2 nd Address if previous is less than 6 months:		City:		State:	Zip Code:
Day Phone:	Work Phone:	Cell Phone:		Email Address – (ie. sonso@abc.ill):	
Languages Spoken:	*Sex - circle one: Male Female	*Birth date:	*Race/Ethnic Group – Circle One: Hispanic Asian/Pacific Islander Black/African American American Indian/Alaskan Native White/European Other		
Are you a citizen of the United States?				If Not, do you have the right to work and live in the U.S.?	
Have you ever been convicted of a felony?		Yes No	If so, when	(year)	and where?
Nature of conviction:					

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY, THEN SIGN AND DATE BELOW.

ACCURACY OF INFORMATION: I hereby certify that I have reviewed the information on each page of this application to make sure that all parts are complete and correct. I understand that my eligibility will be based on the information contained in this application.

FALSIFICATION OF INFORMATION: I hereby certify that all statements made on this application are true and correct. I understand that any false statement made by me on this application could be sufficient cause for dismissal from the volunteer position.

VERIFICATION OF INFORMATION: I understand that as a volunteer for the City of Oklahoma City Parks and Recreation Department, I will be subject to a background check, including criminal history. I authorize the City of Oklahoma City Parks and Recreation Department to investigate and verify the facts claimed by me on this application.

Signature

Date

Check here if you would like your name to be shared with other volunteer organizations. ___ Yes ___ No

For Community Center Staff Use Only

Interviewed By: _____ Title/Locations: _____

Interviewer's comments and recommendations: _____

Interviewer's Signature

Date

Field Operation Supervisor's Signature

Date

Center staff, review all sections of this application, please make sure that all information is legible and correct. Failure to fill out any part of this application will cause delays in your volunteer being able to start working at your center or program.

This application is for adults 18 and over.

ADDITIONAL INFORMATION – ADULT VOLUNTEER APPLICATION

1. Occupation/Career Title: _____
 Current Employer: _____ Supervisor's Name: _____
 Business Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____

2. References:
 Please list three people who are not relatives for your references. References may be contacted.

Name	Occupation/Employer	Work Phone	Home/Cell Phone

3. Previous Volunteer Experience: include organization's name, age of patrons served and years with organization

4. Please tell us how you heard of our program and why you would like to volunteer at our Centers:

5. Availability:
 At what times are you interested in volunteering? (Check all that apply)

I am Flexible		Prefer Weekdays			Prefer Weekends			Prefer Special Events		
Hours		Any	Morning		Afternoons			Evenings		
Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday			
Season	Summer	School Year	Sports related	Fall Break	Winter Break	Spring Break	Other			

6. Preferences:
 Is there a particular type of volunteer work in which you are interested? (Check all that apply)

Working with staff as a class assistant	Helping with large one time only special events
Helping with reports and statistics	Sports and Games
Performing Arts and stage productions	General Administration duties
Teaching individual projects or classes	Setup and cleanup of social gatherings and dances
Nature Center Related	Fish Hatchery / Lake Related
Mainly Indoors	No preference, I can help wherever needed
Mostly Outdoors	Other:

Is there a person or group with whom you are particularly interested in working with? (Check all that apply)

Adults 18+	Youths 6 – 12
Seniors 55+	Teens 13 – 18
Pre-School 4 – 6	No Preference
Males	Females
Special Needs – Physical or Mental	Other:

7. Locations:
 Mark the Center/Sites you prefer, listing first and second choices. (Check all that apply)

Specialty Sites	Sellers Preschool	Aquatic Centers * summer	Southern Oaks
NWO Drama Camps	Play in the Park * summer	Recreation Centers - NW	Recreation Centers - NE
H.B. Parsons Fish Hatchery	Gyms / Athletic Sites	Pilot	Minnis Lakeview
Foster Program Center	Municipal Gym	Macklanberg	Douglass
Foster Pool	Woodson Gym	Melrose	Pitts
Will Rogers Senior	Athletics Leagues – Adult	Recreation Centers - South	
Woodson Senior	Athletics Leagues – Youth	Schilling	
School Breaks	Senior Games	Sellers	