



Adult Volunteer Application

I.D. # _____

Department: _____

Division: _____

Program: _____

Name:		Last	First	Middle Initial	
Address:		Number	Street	Apt. No.	City
Home Phone		Work Phone		California Drivers License #	Class:
()				Exp. Date	
Social Security Number:			Are you under age 18?		Month and Day of Birth (optional)
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Email Address:			Would you like to receive emails about upcoming volunteer opportunities?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you taken the Police Citizens Academy class? If so when?					
Emergency Contact:		Name:		Day	Evening
		Address:		Phone	
				City	Zip
Please answer the following questions. If the answer to any of the questions is YES, please give details to the right.					
				Yes	No
1. Do you have a disability which may limit your ability to perform the job for which you have applied				<input type="checkbox"/>	<input type="checkbox"/>
2. Have you, as an adult, been convicted of a violation of the law, excluding minor traffic violations? A fingerprint check may be made. A YES answer will not automatically disqualify you				<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been discharged from a position?				<input type="checkbox"/>	<input type="checkbox"/>
4. Have you ever worked for the City of Fremont?				<input type="checkbox"/>	<input type="checkbox"/>
EDUCATION: Check the highest grade you completed:		1	2	3	4
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		5	6	7	8
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		9	10	11	12
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		or more	<input type="checkbox"/>		
High School Graduate		<input type="checkbox"/> Yes <input type="checkbox"/> No		Passed High School Equivalency Tests <input type="checkbox"/> Yes	
Name and Location of College or University		Major Subject(s)		Completed	
				Semester Units	Quarter Units
				Degree	
Certificate of Training, Licenses or Professional Registration					
WORK EXPERIENCE: Are you presently employed? (Check as many as apply)					
<input type="checkbox"/> Employed full-time		<input type="checkbox"/> Employed part-time		<input type="checkbox"/> Temporarily unemployed	
<input type="checkbox"/> Full-time student		<input type="checkbox"/> Part-time student		<input type="checkbox"/> Looking for work	
CURRENT EMPLOYER OR SCHOOL:					
Name					
Address				Phone	
Job Title or School		Position or Major			
PREVIOUS WORK EXPERIENCE:					
REFERENCE:					
PREVIOUS VOLUNTEER JOBS					
REFERENCE:					
WHAT VOLUNTEER POSITION ARE YOU APPLYING FOR?					
WHAT ARE YOUR PRESENT GOALS FOR A VOLUNTEER JOB? (e.g., gain school credit, work experience, etc.)					
Times Available:		<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F		<input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings	
Length of Assignment Desired:		<input type="checkbox"/> 3 mos. <input type="checkbox"/> 6 mos. <input type="checkbox"/> 6-12 mos.		<input type="checkbox"/> More than year <input type="checkbox"/> Spot jobs <input type="checkbox"/> Special Projects	
Do you have transportation to and from your volunteer assignment?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Fluent Languages (other than English)		Language _____		<input type="checkbox"/> Read	<input type="checkbox"/> Speak
		Language _____		<input type="checkbox"/> Read	<input type="checkbox"/> Speak
				<input type="checkbox"/> Write	<input type="checkbox"/> Write
I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained in the application. I acknowledge that any false statements or misrepresentation on this application will be cause for refusal of placement or immediate dismissal at any time during the period of my placement. I am aware that fingerprinting, criminal history check and a background investigation will be required before placement in the Police or Fire Departments, and for any sensitive volunteer positions.					
Signature of Applicant:				Date:	
Signature of Parent/Guardian/ Guardian if Volunteer is a Minor:				Date:	
				Work Phone:	

Return to:

Jennie Bauer
Fremont Police Department,
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