

DEPARTMENT REQUEST FOR VOLUNTEERS

☐ General Volunteer ☐ Senior Volunteer 55 yrs+	Student Intern Short-Term Volunteer	Youth Volunteer 13-17 yrs. Other:
Department / Division making re	quest:	Date of Request:
Office Address	Ro	om#
Staff member making request:	Supervis	ing staff member:
Fax #: Ex	tension:Email:	
Project/Event Title:	Vc	olunteer Title:
Total number of volunteers need	ded:	
Project/Event Date(s):		
Time commitment desired: (On a	average, <i>ongoing</i> volunteer pos	itions require approx. 10-15 hrs/wk)
hours/day;da	ays/week	
Estimate of total hours needed:	hrs	
1. Purpose of project / volunteer:		
2. Volunteer duties (please be spo	ecific about tasks and duties):	
3. How is this volunteer position N	IOT a paid staff position? (SEIU	requires an answer to this question)
4. What skills are needed?		
5. What is the most fun thing this position?)	volunteer will be doing? (Or who	at would motivate someone to want this volunteer
6. Legal/policy requirements to be Driving record check¹ Background Check* Other (please be specific):		(as needed/according to department): Provide three job references Reference check
7. Has this volunteer position beer the department head?		Please deliver/return to:
8. Do you have a specific volunted is their name?	er in mind? If so, what	VIP Coordinator 701 Ocean St, Room 30 P: (831) 454-2987 F: (831) 454-3463
Volunteer is responsible to obtain own I VIP/County of Santa Cruz covers the cc Oath of Confidentiality is administered	ost of the Background Check/Finge	donna.patters@santacruzcounty.us rprinting.

For Office Use Only
□ Roster (#)
www.1-800.vol.org
Opportunities Flyer