



1249 Marin Avenue, Albany, CA 94706
 Volunteer Coordinator: 510.524-9283
 www.albanyca.org



ALBANY'S VOLUNTEER CORPS matches qualified volunteers with various City of Albany departments seeking assistance for special projects, events and day-to-day tasks. This application is designed to give applicants the opportunity to indicate their interests, skills and experience, enabling the City to make the best volunteer placement.

Once an application is submitted, the volunteer will be contacted (primarily by email) as volunteer projects become available. Volunteer openings fluctuate based on the current needs of the City and not all positions will be accepting volunteers all the time. View current volunteer recruitments on the City of Albany Volunteer Corps website albanyca.org/news/volunteer.html.

Date _____
 Name _____
 Address _____
 City _____ State _____ ZIP _____
 Home Phone _____ Cell _____
 Email Address: _____
 Emergency Contact _____
 Relationship _____ Phone _____
 Age 14-17 18-54 over 55

AVAILABILITY

Please indicate the length of your commitment and when you are available to volunteer.

- Less than 3 months Less than 6 months 6-12 months Special projects Special events On-call On-Going

	Monday Hours available	Tuesday Hours available	Wednesday Hours available	Thursday Hours available	Friday Hours available	Saturday Hours available	Sunday Hours available
Morning							
Afternoon							
Evening							

VOLUNTEER INTERESTS

Check all volunteer opportunities that interest you.

- | | | |
|---|--|---|
| <input type="checkbox"/> Special events ⁽¹⁾ | <input type="checkbox"/> Senior activities ⁽⁶⁾ | <input type="checkbox"/> Office/data entry ⁽¹¹⁾ |
| <input type="checkbox"/> Green Team (Clean-up/Landscaping) ⁽²⁾ | <input type="checkbox"/> Youth activities ⁽⁷⁾ | <input type="checkbox"/> Computers ⁽¹²⁾ |
| <input type="checkbox"/> Graffiti removal ⁽³⁾ | <input type="checkbox"/> Recreation class assistant ⁽⁸⁾ | <input type="checkbox"/> Emergency Bike Messenger ⁽¹³⁾ |
| <input type="checkbox"/> Landscaping/gardening ⁽⁴⁾ | <input type="checkbox"/> Sports ⁽⁹⁾ | <input type="checkbox"/> Emergency Preparedness ⁽¹⁴⁾ |
| <input type="checkbox"/> Kitchen aide ⁽⁵⁾ | <input type="checkbox"/> Flyer distribution ⁽¹⁰⁾ | <input type="checkbox"/> Other: _____ |

Submit Application to:
 Chelle Putzer
 Community Service Manager
 C/O Albany Community Center
 1249 Marin Avenue, Albany, CA 94706



EXPERIENCE & SKILLS (Tell us a little about yourself!)

Current Occupation	
Interests, skills or hobbies	
Previous volunteer experience	
What prompted you to volunteer?	
How did you hear about the Albany Volunteer Corps?	

COMPLETE THIS SECTION IF YOU ARE VOLUNTEERING TO RECEIVE COMMUNITY SERVICE CREDIT

Name of school/agency _____

Teacher/agency contact _____

School/agency phone _____

of Hours Required _____ When are your hours due? _____

LIABILITY WAIVER

I, _____, as a volunteer for the City of Albany, hereby assume complete responsibility for any injury or damage I sustain, directly or indirectly, from my participation in the city volunteer program. I agree to hold the City, its agents, officers, and employees harmless from and against any and all costs, expenses or liability incurred as a result of any claim, suit, lien or other legal proceeding (including attorney's fees) against the City from negligent acts related to my volunteer service.

The City will provide written notice to any volunteer whose services are no longer needed. An exit interview will be offered to all volunteers. I understand that I am to follow the correct procedures for this program.

As a City of Albany volunteer, I am not covered under Worker's Compensation for injury or illness. The City does provide me with supplemental Accident Insurance and Personal Liability Insurance. The Volunteer Coordinator will provide me with the necessary information regarding this coverage.

I understand that the City may conduct a driving record and criminal background check as part of the volunteer application process. This form serves as my authorization for the City to perform this check.

I have _____/have not _____ been convicted of a violation of the law, excluding minor traffic violations (please check appropriate response - if yes, provide details on a separate sheet. Convictions do not automatically disqualify you).

I have read the above and fully understand what I have read.

Volunteer Signature _____ Date _____

Parent/Guardian Signature if under 18 _____ Date _____

Parent/Guardian Name (Please Print) _____ Date _____

FOR OFFICE USE ONLY

Assignment: _____	Staff Supervisor: _____
Date Entered in Database: _____	Entered By: _____