

VOLUNTEERS....

Changing the Future



Pitt County Government

Volunteer Application

VOLUNTEER SERVICES

**Pitt County Government
1717 West Fifth Street
Greenville, NC 27834
(252) 902-3050**

Date: _____

Full Name : _____
(Last) (First) (Middle) (Preferred)

Mailing Address: _____

Phone: (_____) _____ (_____) _____ (_____) _____
Home Work Other

Social Security Number: _____ - _____ - _____ **Date of Birth (mm/dd/yy):** _____

Permanent Mailing Address (if student): _____

Email Address: _____

Occupation: _____ **Business Name/Address:** _____

Education: _____

Job Training/Work Experience: _____

Volunteer Experience: _____

Special talents, skills, etc.: _____

Check One: ___ Academic placement ___ College student ___ Volunteer from community ___ Work-First participant

How did you hear about this volunteer program? _____

What type of volunteer assignment are you seeking? _____

Why do you want to volunteer and what would you like to gain from your experience? _____

How long are you willing to commit to a volunteer assignment with Pitt County Government? _____

Check the day(s) of the week and give the times available to volunteer:

Days	Morning Hrs	Afternoon Hrs
____ Monday	_____	_____
____ Tuesday	_____	_____
____ Wednesday	_____	_____
____ Thursday	_____	_____
____ Friday	_____	_____
____ Weekends (Special Events)	_____	_____

Will your schedule remain the same during this commitment? Yes No If no, please explain: _____

Describe any work-related physical/mental limitations or special needs: _____

Have you ever volunteered for Pitt County Government before? Yes No

If yes, when and in what capacity?

Can you support our drug/alcohol-free county government policy? Yes No

Have you ever pleaded guilty or been convicted of a crime other than a minor traffic violation? Yes No

If yes, explain (use an additional sheet if necessary): _____

For students only: Anticipated Date of Graduation: _____

School: _____ Area of Study: _____

If you are volunteering to receive school credit, provide the following information:

Contact Person/Title: _____ Phone Number: (____) _____

Time Commitment (total number of hours): _____

List one reference who can speak of your work ethic/performance/character either in a job/as a volunteer/or academia.

Name: _____ Phone Number: (____) _____

Relationship to applicant: _____

Return completed application to the Human Resources Office. If accepted to interview, you will be called. Pitt County Government does not discriminate on the basis of race, religion, sex, national origin, or handicap basis. Emphasis is placed on matching your skills and abilities with assessed government needs. **A minimum three (3) month commitment is expected for ongoing site-based assignments. Bring a photo ID (Driver's license preferred) to the scheduled screening interview. You will be expected to sign a Legal Liability Release upon placement and attend the New Volunteer Orientation.**

I hereby apply to become a volunteer with Pitt County Government, to abide by my commitment, to keep all client information strictly confidential, and comply with all County policies. I further agree to document the time I volunteer and assure the reporting of such time to the Volunteer Services Director or Designee on a monthly basis. The information and my responses on this application are true and accurate to the best of my ability.

Signature of Applicant Date

Signature of Parent/Guardian (if applicant is a minor) Date