

City of Woodinville Volunteer Intake Form



Thank you for your interest in the City of Woodinville Volunteer Program.
Your responses below will help us to match your talents and interests to our needs.

It is the policy of the City of Woodinville to provide volunteer opportunities without regard to any individual's sex, race, color, religion, national origin, pregnancy, age, marital status, medical condition, or disability.

PERSONAL INFORMATION (Please print a complete response to each item)	Date of Birth (DOB):
First Name: _____ Last Name: _____ Middle Initial: _____	Primary phone: _____

A1: Please check **all** areas that interest you:

Office Assistance	Special Event Support +	Environmental Stewardship	Recreation	Government
<input type="checkbox"/> Concierge <input type="checkbox"/> Data entry <input type="checkbox"/> Filing/archives <input type="checkbox"/> Computer <input type="checkbox"/> Bilingual translation <input type="checkbox"/> Phone <input type="checkbox"/> Customer service <input type="checkbox"/> General office <hr/> <div style="border: 1px solid black; padding: 2px;">Media/Cable TV</div> <input type="checkbox"/> Audio <input type="checkbox"/> Visual/graphics	<input type="checkbox"/> Project management <input type="checkbox"/> Emcee <input type="checkbox"/> Setup/Breakdown <input type="checkbox"/> Registration <input type="checkbox"/> Arts/Crafts <input type="checkbox"/> Music/Audio <input type="checkbox"/> Photographer <input type="checkbox"/> Crowd/Parking <input type="checkbox"/> Other: <i>+ for list of City special events go to http://www.ci.woodinville.wa.us/opportunities/volunteers.asp</i>	<input type="checkbox"/> Sammamish River restoration <input type="checkbox"/> Salmon Watcher <input type="checkbox"/> Habitat restoration <input type="checkbox"/> Park enhancement <input type="checkbox"/> Plant monitor <input type="checkbox"/> Storm drain stenciling <input type="checkbox"/> Other:	<input type="checkbox"/> Concierge/reception <input type="checkbox"/> Teens (tutor, chaperone, etc) <input type="checkbox"/> Youth (coach, etc) <input type="checkbox"/> Preschool age <input type="checkbox"/> Seniors <input type="checkbox"/> Bilingual translation <input type="checkbox"/> Instructor (class type: _____) <input type="checkbox"/> Instructor assistant <input type="checkbox"/> Off-site afterschool programs <input type="checkbox"/> Other:	<input type="checkbox"/> Parks & Recreation Commission <input type="checkbox"/> Planning Commission <input type="checkbox"/> Tree Board <input type="checkbox"/> Public Art Advisory Committee <input type="checkbox"/> Teen representation <input type="checkbox"/> Other:

A2: Please list any accommodations you need to perform volunteer duties:

A3: Please list your hobbies, skills or special knowledge you think would help in your volunteering, including proficiency in languages:

A4: Please give your current status (student, worker, retired, homemaker): _____

A5: Please indicate the days and times you are available to volunteer:

Day of the Week	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

B: Do you need to fulfill a specific requirement for service hours? Yes No
 _____ for school or college Name of school: _____
 _____ for court mandate Name/type of offense: _____
 Total number of hours required: _____

C: Please list any previous work and/or volunteer experiences:

Organization	Start Date (mo/yr)	End Date (mo/yr)	Position/responsibilities
1.			
2.			
3.			

Please return Intake Form to:
Volunteer Administration
17401 133 Ave NE
Woodinville, WA 98072

425-398-9327
Fax: 425-489-2758
lindap@ci.woodinville.wa.us

Someone from the City will be contacting you.

Thank you!