



**Volunteer Application**  
**Volusia County Government, Personnel Division**  
**230 N. Woodland Blvd, Suite 262, DeLand, Florida 32720**  
**Phone: (386) 736-5951 Fax: (386) 740-5149**  
[tking@volusia.org](mailto:tking@volusia.org)

VOLUNTEER APPLICANT INFORMATION		
FIRST NAME	MIDDLE INITIAL	LAST NAME
ADDRESS		
CITY/STATE/ZIP		AGE (IF UNDER 18)
CELL PHONE		HOME PHONE
EMAIL ADDRESS		EMERGENCY CONTACT (NAME AND PHONE #)
EDUCATION		
WHAT IS YOUR HIGHEST LEVEL OF EDUCATION:		
<input type="checkbox"/> Some High School	<input type="checkbox"/> Some College	<input type="checkbox"/> Associate's Degree
<input type="checkbox"/> High School	<input type="checkbox"/> Technical College	<input type="checkbox"/> Bachelor's Degree
		<input type="checkbox"/> Master's Degree
		<input type="checkbox"/> Doctorate
DRIVER'S LICENSE INFORMATION		
DO YOU HAVE A VALID LICENSE? YES <input type="checkbox"/> NO <input type="checkbox"/>	DRIVER'S LICENSE # AND STATE WHERE ISSUED	CLASS
<b>This information not needed until the interview.</b>		
VOLUNTEER OPPORTUNITIES		
<input type="checkbox"/> Daytona Beach International Airport	<input type="checkbox"/> Marine Science Center	<input type="checkbox"/> Adopt a Road
<input type="checkbox"/> Environmental Services	<input type="checkbox"/> Green Volusia	<input type="checkbox"/> UF IFAS Volusia County Extension
<input type="checkbox"/> Sheriff's Office (which location/program)	<input type="checkbox"/> DeBary Hall	<input type="checkbox"/> Lyonia Preserve
<input type="checkbox"/> Library (which location)	<input type="checkbox"/> Fire Services	
<b>Please note: The Library requires an additional supplemental questionnaire.</b>		
AVAILABILITY		
WHAT DAYS ARE YOU AVAILABLE?		WHAT TIMES ARE YOU AVAILABLE?
<input type="checkbox"/> Monday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Mornings
<input type="checkbox"/> Tuesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Afternoons
<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Evenings
<input type="checkbox"/> Sunday		HOW MANY HOURS PER WEEK CAN YOU VOLUNTEER?
BACKGROUND, EXPERIENCE AND INTERESTS		
Please indicate any special skills, such as computer skills, or specialized training that may be beneficial or helpful in your volunteer position.		
If you speak, read, or write fluently in a foreign language, please provide that language.		
Previous volunteer experience.		
SIGNATURE CERTIFICATION AND RELEASE OF INFORMATION		
I certify that all answers provided herein are true, correct and complete to the best of my knowledge. I understand that all volunteer positions are charitable contributions to Volusia County government without anticipation of compensation or benefit of any kind or consideration of future employment. In volunteering for Volusia County government, I agree to comply with all the rules, regulations and dress code for my area. I understand that depending on the area in which I will be volunteering, I may be required to submit to a national background check administered by Volusia County government. I understand that the contents of this application are considered public information and any member of the general public may request to review or receive a copy as public record as defined under the laws of the State of Florida. I have read and understand the above information.		
X _____		_____
SIGNATURE OF APPLICANT		DATE
If under the age of 18, a parent/guardian must sign below acknowledging he/she has read the application and given permission for you to volunteer.		
Parent/Guardian name (please print) _____		
Parent signature X _____ Date: _____		