



# Volunteer Application

Discover the fun!

Please advise us if any accommodation is needed to participate in the application process.

\*Note: Completion of this application gives Champaign Park District permission to perform a criminal background check as necessary.

Application Date	<input type="checkbox"/> Adult <input type="checkbox"/> Teen	
Last Name	First Name	MI
Nickname	Home Phone	
Address	Apt #	
City	State	Zip
E-mail Address	Emergency Contact	
Date of Birth		

## EDUCATION AND WORK EXPERIENCE

Current Employer	Are you a student?
Work Phone	Last Grade Completed
Position Responsibilities	

## VOLUNTEER WORK PREFERENCE

## AVAILABILITY

<input type="checkbox"/> Seniors	<input type="checkbox"/> Coaching:	Please check the boxes for the days and times you are most often available to volunteer.							
<input type="checkbox"/> Animals	Which sport?								
<input type="checkbox"/> Virginia Theatre	League preference (if any)		S	M	T	W	T	F	S
<input type="checkbox"/> Special Events	Have you coached for the Park District before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Morn.							
<input type="checkbox"/> Special Recreation	Do you have a child participating? <input type="checkbox"/> Yes <input type="checkbox"/> No	After.							
	If so, child's name	Eve.							

## REFERENCES

List name and phone of two personal references.

Name	Phone
Name	Phone

Are you required to volunteer?    No     Yes    If yes, by whom? \_\_\_\_\_

How did you hear about our Volunteer Program? \_\_\_\_\_

Why would you like to volunteer with the Champaign Park District? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional information \_\_\_\_\_

\_\_\_\_\_

Please return to Volunteer Coordinator (217) 398-2550 at 706 Kenwood Road, Champaign, IL 61821-4112.