



City of Cheney Volunteer Program Application

Thank you for your interest in volunteering for the City of Cheney. We are seeking the highest quality of people to assist us in providing services to the community. Please complete both sides of this application in addition to a Washington State Background check form and return it to the volunteer coordinator for the specific department you wish to volunteer for.

Name: _____ Phone Number: _____

Address _____ Cell Phone: _____

_____ E-Mail: _____

Circle the days you can be available for work: Sun / Mon / Tues / Wed / Thurs / Fri / Sat

Educational History:

High School: _____ Location: _____ Years Completed: _____

College: _____ Major: _____ Years Completed: _____

Employment History:

Employer: _____ City, State: _____ Dates Employed: From- _____ To- _____

Supervisor Name/Title: _____ Contact Number: _____

Employer: _____ City, State: _____ Dates Employed: From- _____ To- _____

Supervisor Name/Title: _____ Contact Number: _____

References (Not Related):

Name: _____ Contact Number: _____

Name: _____ Contact Number: _____

Please briefly answer the following questions:

1. Please describe why you are interested in volunteering with the City of Cheney.

2. Please list any special certifications that you possess. Examples – CPR, First Aid, Health Card, etc.

3. Please list any construction-related skills or areas of interest you have related to the preservation or rehabilitation of historic buildings.

4. Please describe any physical limitations you might have.

To the best of my knowledge, the information herein is true and complete. I understand that falsification of this application is grounds for dismissal as a volunteer. Further I give permission for an authorized representative of the City to conduct a state patrol criminal background check in accordance with RCW 43.43.830-839 and to inquire of individuals about my ability to perform all aspects of the volunteer position for which I am being considered and I release the City of Cheney and those individuals/institutions that provide information from any liability that may arise from the provision of this information.

As a volunteer for the City of Cheney, I am fully aware that the work associated with being a City Volunteer involves certain risks of physical injury or death. Being fully informed as to these risks and in consideration of my being allowed to participate in the City’s Volunteer Program, I hereby assume all risk of injury, damage and harm to myself arising from such activities or use of City facilities. I also hereby individually and on behalf of my heirs, executors and assignees, release and hold harmless the City of Cheney, its officials, employees and agents and waive any right of recovery that I might have to bring a claim or a lawsuit against them for any personal injury, death or other consequences occurring to me arising out of my volunteer activities.

I give permission to have my photo taken and used for publicity purposes by the City. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program.

I have read and the Volunteer Policies and Procedures for the City of Cheney and I am aware that the following rules are a condition of my status as a volunteer.

Name of Volunteer

Signature of Volunteer

Date

(If under 18)

Parent or Guardian’s Signature: _____

Date: _____

Please submit to: Sterling-Moorman House Volunteer Coordinator

(509) 498-9240

Planning Department

112 Anderson Rd

sbeeman@cityofcheney.org