



COCC Volunteer Application

Please print clearly or type your application and sign it.

Directions

1. Volunteer completes form
2. Program/department designee reviews form for completeness, verifies information and sends to HR Dept

Name:		Date:	
Other Names Used:			
Address:		City:	State and Zip Code:
Telephone Number	Message Telephone Number		E-Mail Address:
Position Applying For:			
Interested in:	Full Time	Part Time	Both
Date Available:			
Are you at least 18 years of age?		Yes	No
Have you ever been employed by Central Oregon Community College?		Yes	No
If so, in what capacity and dates of employment:			

Program where I'd like to Volunteer (a list of all programs is available upon request)

DAYS AND TIMES AVAILABLE: (If known, list the hours each day you would like to volunteer.)

Days of Week: Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat/Sun _____

Availability: _____ am/pm _____ am/pm _____ am/pm _____ am/pm _____ am/pm _____ am/pm

TYPE OF VOLUNTEER WORK DESIRED:

Classroom

Working with Children

Working with Staff

Working on Projects

Other (please explain)

Office

Filing

Typing

Working on Projects

Employment History: Please state employment experience

Present/Last Employer:	Supervisor's Name:
Telephone Number: (Please include area code)	Supervisor's E-Mail Address:
Address:	City, State, & Zip Code:
Job Title:	
Worked From: (Month/Year)	Worked To: (Month/Year)
Duties:	
Still Employed or Reason for Leaving:	



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Certification

I certify that any and all statements, which I have set forth in this application, are true and correct to the best of my knowledge. I also recognize that any omissions or false information provided herein may disqualify me as an applicant and subject me to discharge in the event that I am hired.

Certification

I understand that COCC requires a criminal history check for this position, and if an offer of employment is made, this will be contingent upon satisfactory completion of the criminal background check. I understand that background check results are evaluated on a case-by-case basis alongside the job responsibilities, and that in selected circumstances, felony convictions as related to the duties and responsibilities of a given position may influence consideration for employment.

I understand that any falsification, misrepresentation, or material omission in my application materials (including this certification) or making other false or fraudulent representations in securing employment may be grounds for disqualification of my candidacy or (if discovered after the date of hire) invalidation of any employment status, without recourse or appeal. My acknowledgment below authorizes COCC to conduct an inquiry into any information related to my potential or continued employment with COCC. I authorize the release of such information to COCC including but not limited to, contacting references; verifying all of my application materials; obtaining prior education records including degrees obtained; prior employment records including positions held, any disciplinary actions and reasons for termination; driving record information, and obtaining information pertaining to convictions (including guilty or no contest pleas). I agree that facsimiles or photocopies of this authorization shall be deemed as valid as the original. I further release COCC and any of its agents from any liability whatsoever in requesting this information and using such information for employment purposes.

I authorize COCC to check my references and to investigate any information provided in my application for employment. I also consent to any post-offer, pre-employment criminal history check when requested by the College. I further authorize my past employers or anyone with information about my work history, education or qualifications to provide such information to COCC in response to their inquiry.

I certify that I have read and agree with these statements.

Applicant Signature

Date