



LINCOLN COUNTY Volunteer Registration/Application

Name _____ Primary phone _____

Mailing Address _____ Secondary phone _____

City _____ Zip _____ E-mail _____

Current employer or school: _____ Phone: _____

Education, work or volunteer experience: _____

Skills or certification: _____

Languages you speak: _____ or write: _____

Have you ever been convicted of a crime? Yes No

If yes, explain (conviction, date, arresting agency): _____

Volunteer assignment you are requesting: _____

Indicate the days of the week you are available or prefer:

SUN MON TUES WED THURS FRI SAT Hours: _____

Personal References (not related)

Name	Address	Phone Number	Relationship

Work or Volunteer References

Name	Address	Phone Number	Relationship

Emergency Contact Information

Name	Address	Phone Number	Relationship

I give my permission for the named references to be contacted either verbally or in writing. I also understand that information obtained will be used only in conjunction with a Lincoln County volunteer position. I agree to a background investigation, including, but not limited to a criminal history check. All of the information on this application is true to the best of my knowledge.

Signature _____ Date _____

Print Name _____

Return completed application to Lincoln County's Personnel Department located at 210 SW 2nd Street, Newport, OR 97365.

Phone: 541-265-4157

Fax: 541-265-4906

e-mail: personnel@co.lincoln.or.us