

## City of Gresham Volunteer Application

City of Gresham Volunteer Program 1333 NW Eastman Parkway Gresham, Oregon 97030 (503) 618-2482

		Date:			
Name:					
Address:	City:	_ State: Zip Code:			
ay Phone: Evening Number:					
Email Address:					
Availability: What days are you available to voluntee I Monday I Tuesday I Wede		Month Year			
What time of day is best?  Output Description: Mornings Afternoons Description: Evenings					
Will you be volunteering to fulfill any kind of requirement? □ Yes □ No If yes, how many hours? What organization?					
How did you hear about volunteer opportunities with the City?					
What volunteer activities are you most interested in?					
Park/Recreation: Park/Trail Restoration Adopt-A-Park Adopt-A-Trail Adopt-A-Road Gresham Japanese Garden	Watershed Warriors: Stream Walk Bird & Wildlife Surveys Volunteer Events Habitat Box Building Storm Drain Marking Backyard Habitat Program	Public Safety:         Citizen Volunteers in Policing         Emergency Preparedness         Neighborhood Watch         Youth & Family:         Second Home Student         Mentoring         Other:			
Community Building: <ul> <li>Neighborhood Associations</li> <li>East Metro Mediation</li> <li>Green &amp; Clean</li> <li>Main City Saturdays</li> <li>Gresham Arts Festival</li> </ul>	<ul> <li>Backyald Habitat Program</li> <li>Natural Area Restoration</li> <li>Pollinator Gardens</li> <li>Recycling Education:</li> <li>Outreach/Education</li> <li>Earth Day Collection Event</li> </ul>				

Skills and abilities:					
Occupation:	Emplo	oyer:			
Hobbies:					
Education/special training:					
License(s):	e(s): Professional Certifications:				
Do you speak any languages other that	in English?				
Are you CPR certified? Are you First Aid certified?	□ Yes □ No □ Yes □ No	•			
Relevant Experience (paid or voluntee	er)				
Why are you interested in volunteering	ng?				
Emergency Contact: Name: Phone:		onship:			
Personal References:					
Name:					
Address: Relationship:	City	State	2ip code		
Name: Address:	Phone	:			
Address: Relationship:		State:	Zip Code:		
Thank you	for your interest in volur	teering for City of Gresham!			
The City of Gresham's programs, services, em race, religion, color, national origin, sex, age, program visit <u>https://greshamoregon.gov/Vc</u>	marital status, disability, or				