



VOLUNTEER/ CONTRACT INSTRUCTOR CHECK OFF LIST

- RESEARCH OPPORTUNITIES**
- COMPLETE VOLUNTEER APPLICATION**
- COMPLETE DEPARTMENT INTERVIEW**
- COMPLETE FINGERPRINT/BACKGROUND CHECK**
- SUBMIT PROGRAM GUIDE PROPOSAL**
- COMPLETE/SIGN AGREEMENT**
- COMPLETE DEPARTMENT TRAINING**

For fingerprint and background checks please call the Airport Badging Office at 760-318-3830, Tues.-Fri. 6:30am-2:30pm, to make your fingerprinting appointment. Please make sure to bring two (2) forms of government issued identification, one with a picture, with you for your appointment (please see form attached for clarification).

Please notify Jasmine volunteer coordinator at the Department of Parks & Recreation, upon the completion of your fingerprinting by phone at 760-416-4030 or by email at Jasmine.Waits@palmspringsca.gov



Volunteer/Contract Instructor Process

Opportunities: Visit the City of Palm Springs website (www.palmspringsca.gov for volunteer opportunities with the Department of Parks & Recreation).

Application: City of Palm Springs website (www.palmspringsca.gov) Department of Parks & Recreation for the Volunteer application. Submit your application to Jasmine Waits, Events Manager. **{Applies to all applicants}**

Interview: Parks & Recreation Staff will conduct an interview and provide notification of acceptance. **{Applies to all applicants}**

Background/Fingerprinting: Parks & Recreation Staff will provide you with a authorization form for background checks. Applicant can schedule their appointment at the Palm Springs Airport per their schedule. Parks & Recreation will pay the nominal fee required. **{Applies to all applicants}**

Training: Attend an initial orientation session and on-the-job training. **{Applies to all applicants}**

Contract Instructor

Proposal: Submit a detailed Program Guide of the recreation program you would like to provide the residents and visitors of Palm Springs.

Marketing for proposed Program: (such as brochures, flyers, rack cards, business cards, etc.).

Certification/License: provide copies of certifications/license needed in order to provide the proposed program or service.



CITY OF PALM SPRINGS
 3200 E. Tahquitz Canyon Way
 Palm Springs, CA 92262
 Telephone: (760) 323-8215
www.palmspringsca.gov

Volunteer Interest Application

THE CITY OF PALM SPRINGS VISION STATEMENT: Palm Springs aspires to be a unique world class desert community. Our residents and visitors enjoy our high quality of life and the fun, festive, relaxing experience. We desire to balance our cultural and historical resources with responsible, sustainable economic growth and to enhance our natural beauty. We are committed to providing responsive, efficient services in an environment of sound fiscal management.

EQUAL OPPORTUNITY: The City of Palm Springs encourages all persons to file applications with us as we do not discriminate on the basis of race, color, creed, national origin, ancestry, age, sex, sexual orientation, gender, gender identity, gender expression, family or marital status, disability, medical condition or pregnancy, genetic information, religious or political affiliation, or veteran status, or any other basis protected by applicable federal, state or local law.

INSTRUCTIONS: FILL OUT THIS FORM COMPLETELY. PLEASE SUBMIT ORIGINAL APPLICATION FORMS, NOT PHOTOCOPIES. THIS APPLICATION AND ANY ATTACHMENTS BECOME THE PROPERTY OF THE CITY OF PALM SPRINGS. FOLLOW ANY ADDITIONAL INSTRUCTIONS AS REQUESTED FOR THE SPECIFIC VOLUNTEER OPPORTUNITY.

VOLUNTEER APPLICATION FOR:

DEPARTMENT: _____ AREA OF INTEREST: _____

Please complete a separate application for each Department and/or area of interest.

LAST NAME: _____ FIRST: _____ MIDDLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE 1: _____ PHONE 2: _____ EMAIL: _____

DAY(S) AND HOURS AVAILABLE:

SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY

LIST ANY EXCEPTIONS TO YOUR AVAILABILITY:

EDUCATION TRAINING, EXPERIENCE:

ARE YOU ENROLLED IN HIGH SCHOOL? YES NO GPA _____

DID YOU RECEIVE A HIGH SCHOOL DIPLOMA? YES NO GED

LIST ANY COLLEGE, BUSINESS, TRADE, CORRESPONDENCE OR OTHER COURSES BELOW:

NAME OF SCHOOL	CITY	STATE	MAJOR SUBJECT COURSE OF STUDY	CREDIT UNIT HRS	LIST DEGREE OR CERTIFICATE
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

LIST ANY SKILLS, ABILITIES, EXPERIENCE, LICENSES OR PROFESSIONAL REGISTRATIONS THAT YOU FEEL WOULD BE BENEFICIAL FOR AS A VOLUNTEER:

PLEASE PROVIDE A MINIMUM OF TWO REFERENCES WHO KNOW YOUR INTERESTS AND ABILITIES:

NAME

RELATIONSHIP

PHONE

SUPPLEMENTAL INFORMATION:

ARE YOU LEGALLY ELIGIBLE TO VOLUNTEER IN THE UNITED STATES AND CAN YOU PROVIDE EVIDENCE OF YOUR ELIGIBILITY?

YES NO

ARE YOU AT LEAST EIGHTEEN (18) YEARS OF AGE? IF UNDER 18 A WORK PERMIT MAYBE REQUIRED.

YES NO

HAVE YOU EVER BEEN AN INTERN/VOLUNTEER OR BEEN EMPLOYED BY THE CITY OF PALM SPRINGS?

YES NO

HAVE YOU EVER WORKED OR ATTENDED SCHOOL UNDER ANOTHER NAME?

YES NO

ARE ANY RELATIVES AN INTERN/VOLUNTEER OR EMPLOYED BY THE CITY OF PALM SPRINGS?

YES NO

HAVE YOU EVER BEEN DISMISSED OR RELEASED FROM A VOLUNTEER ASSIGNMENT/EMPLOYMENT OR HAVE YOU EVER RESIGNED TO AVOID DISCHARGE?

YES NO

SHOULD YOU BE CONSIDERED FOR A VOLUNTEER ASSIGNMENT, A BACKGROUND INVESTIGATION MAY BE PERFORMED. (A CONVICTION IS NOT NECESSARILY A BASIS FOR DISQUALIFICATION FOR A VOLUNTEER ASSIGNMENT)

IF THE ANSWER IS "YES" TO ANY OF THESE QUESTIONS, PLEASE EXPLAIN IN DETAIL IN THIS SPACE:

CERTIFICATE OF APPLICANT: I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS OF MATERIAL FACT WILL SUBJECT ME TO DISQUALIFICATION OR DISMISSAL FROM ANY VOLUNTEER PROGRAM.

SIGNATURE _____ **DATE** _____



Parks & Recreation Department Background / Fingerprint Authorization

Personal Information

Last Name :		First:	Middle:	
AKA:				
Address:				
City:		State:	Zip Code:	
Telephone: ()		SS#:		
Date of Birth:		Place of Birth:		
Country of Citizenship:		Country Code (internal use only):		
DL/ID#:		DL/ID Issued by:		
Sex:	Race:	Height:	Weight:	
Hair Color:		Eye Color:		

Applicant Acknowledgment

I hereby certify that all the above information is true and complete to the best of my knowledge and belief. I understand that this information will be used solely for the purpose of a background investigation as part of my employment application with the City of Palm Springs.

Applicant signature: _____ Date: _____

Fingerprint Appointment: Date: _____ Time: _____

ID: Two forms of government issued Identification is required. One must be a picture ID.

Location: Palm Springs International Airport, Vehicle Inspection Plaza. Parking is available next to brown brick wall.

Internal Use Only

Requested By: _____ Date: _____

Completed By: _____ Date: _____

Return completed form and investigation report to the Parks and Recreation Department. (760) 323-8272

Results: Received: _____ Passed Failed Voucher to Finance