



VOLUNTEER APPLICATION

Rio Vista Recreation Center
 8866 – A West Thunderbird Road
 Peoria, Arizona 85381
 Phone: 623-773-8600
www.peoriaaz.gov/riovista

Mailing Address:
 Attention Rio Vista Recreation Center
 8401 W Monroe #180
 Peoria, Arizona 85345

Thank you for your interest in becoming a volunteer. Volunteers are IMPORTANT to the success of programs and daily functions at the Rio Vista Recreation Center! Please complete this application and submit it to the Rio Vista Recreation Center Staff. Due to the nature of some volunteer work, the Center makes an effort to screen volunteers for the safety of the participants and other volunteers. The information provided will be used to evaluate each volunteer’s experience and background history.

INSTRUCTIONS: Write legibly. Fill in all spaces accurately.

LAST NAME		FIRST NAME		BIRTHDATE:	
ADDRESS:		APT. #	CITY:	ZIP:	
HOME PHONE:		WORK PHONE:		CELL PHONE:	
E-MAIL ADDRESS:		Circle last grade completed: 6 7 8 9 10 11 12 College 1 2 3 4 MORE			

DAYS & TIMES AVAILABLE: Circle days & write times.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

AREAS OF INTEREST: Check all that apply.

Front Desk: _____	Climbing Wall: _____	Facilities Oversight: _____
Clerical: _____	Kids’ Corner: _____	Adventure Room: _____

Please list current or most recent employer or where you have done previous volunteer work:

Employer: _____ Supervisor Name: _____

Address: _____ City/ Zip: _____

Position Held: _____ Phone Number: _____

May we contact this employer? YES: _____ NO: _____

Please list one personal reference:

Contact Name: _____ Phone Number: _____

Please list your special skills, interest or hobbies that would help in your volunteer placement:

What interests you about volunteer work at the Rio Vista Recreation Center?

Please list any special requests or accommodations you may need:

Have you ever been convicted of any violations of federal, state, local or military law or statute? YES: _____ NO: _____

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By signing this application, I certify that all information on this form is true to the best of my knowledge. I also authorize the City of Peoria Rio Vista Recreation Center to make all necessary and appropriate investigations allowable by law.

Applicant Signature: _____ Printed Name: _____

(If under 18) Parent/Guardian Signature: _____ Date: _____

FOR OFFICE USE ONLY:

DATE RECEIVED:	DATE INTERVIEWED:	ACCEPTED: YES NO	FINGERPRINT REQUIRED: YES NO
PLACEMENT:		START DATE:	