



# Ramsey County Volunteer Assignment Application

Thank you for your interest in becoming a volunteer for Ramsey County!

Please complete this application form if you are interested in becoming a Ramsey County volunteer. You will need to specify an Assignment Preference. Responses in the fields marked with an asterisk (\*) are required.

Once you complete the form, sign and date it and return it to the volunteer coordinator listed on the webpage for the assignment you are seeking.

1. Any false or incomplete information may be grounds for not appointing you to a volunteer assignment or ending your assignment after beginning volunteering.
2. You may be required to verify any or all of the information given on this application.
3. You authorize and release Ramsey County to contact prior employers, educational institutions and references.
4. You are responsible for notifying Ramsey County of any changes to your contact information (i.e., phone, email or address).
5. You may be required to pass a background check as part of this volunteer application process and authorize Ramsey County to conduct a background check.
6. You may be required to verify parental permission to serve as a volunteer if you are under age 18 by completing a supplemental Parental/Guardian Permission Form. A copy of this form along with a description of the volunteer assignment duties will be given to you and your parent/guardian if you are contacted for further consideration. PLEASE NOTE any minimum age requirements for the volunteer assignment you are seeking.
7. You may be required to attend an orientation session or complete a training program prior to beginning a volunteer assignment.

### Name and Address

Please provide the following information. Most communication from Ramsey County will take place via email.

\*First Name: \_\_\_\_\_ \*Last Name: \_\_\_\_\_

\*Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Maiden or Previous Name(s), if applicable: \_\_\_\_\_

### Demographic Information

The following questions are OPTIONAL, except if you are under age 18, please provide your date of birth (including birth year.)

Date of Birth: (Month: \_\_\_\_\_/Day: \_\_\_\_\_/Year (year optional): \_\_\_\_\_)

Gender:  Female  Male

How did you hear about us?

- Employee/Friend
- Newspaper
- School

- HandsOn Twin Cities
- Other
- VolunteerMatch

- I Can Help Twin Cities
- Ramsey County website

Ethnicity:  American Indian/Alaskan Native  Asian/Pacific Islander  Black/African American  
 Hispanic/Latino  Not Specified  White

Do you require anything (either during application screening interviewing processes or for completing volunteer assignment duties) to accommodate a disability or language difficulty? Please briefly explain what you need:

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### Availability/Location Preference

Please indicate the days and times you are usually available to volunteer. This information will be used to initially match your availability with our scheduling needs.

You will need to select one ASSIGNMENT (location) PREFERENCE for this application. Your application will be routed to the appropriate staff members for further review and contact.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Term of Commitment:

- 3 months     6 months     9 months     12 months     Ongoing     Other

\*Assignment Preference (Choose one):

- Community Corrections
- Community Human Services
- Lake Owasso Residence
- Parks & Recreation
- Ramsey County Care Center
- Tamarack Nature Center
- Veterans Services

### Skills, Interests & Experience

Please tell us about your skills, interests and experiences by completing the following skills inventory. This information will help us to best match you to our volunteer assignment needs.

- Language:             American Sign Language     Hmong     Oromo  
                           Other                                 Somali     Spanish
- Educator Skills     Budgeting                             ESL Instruction     Health/Nutrition  
                           Interpretation – Cultural     Interpretation – Environmental     Interpretation - Historical  
                           Job Coaching                         Training                                 Tutoring
- Administrative Support:  Database Reports                     Evaluation                             General Office  
                               Planning                                 Receptionist                             Research  
                               Supervision
- Entertainment:     Dance                                     Instrument                             Magic  
                           Sing
- Interpersonal:     AA Group Facilitation                 Advocacy                                 Group Facilitation
- Marketing-Media:     Graphic Design                         Photography                             Video Production
- Marketing-Outreach:  Media Relations                         Speakers Bureau                         Writing

Facilities Maintenance:  Carpentry  General Repair  Landscaping/Gardening  
 Painting

Nature:  Animals  Plants

Development:  Event Planning  Fund Raising  Grant Writing  
 Volunteer Board

**Skills, Interests & Experience (continued)**

Recreation/Leisure Activities:  Arts/Crafts  Board Games  Cards  
 Exercise  Outings  Sewing  
 Sports

Spiritual/Religious:  Bible Study  Chaplaincy  Religious Programs  
 Worship Services

**Relevant Educational History**

Please provide the following information.

Education:  Associates Degree  Bachelors Degree  High School Diploma/GED  
 JD (Law Degree)  Masters Degree  PhD  
 Some College  Trade/Vocational

Name of School (for internship applicants): \_\_\_\_\_

Student (currently):  YES  NO

Please list any relevant degrees (received or sought), courses, certifications, licenses, etc. that relate to the type of volunteer assignment you are seeking:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relevant Work/Volunteer Experience**

Please list your most relevant work or volunteer experiences as they relate to the type of volunteer assignment(s) you are seeking.

Employment Status:  Full Time  Part Time  Retired  Unemployed

Organization 1 Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Organization 2 Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## References

Please provide references who are familiar with your background and character, one of whom is not related to you.

1. First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

3. First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

4. First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Emergency Contacts**

Please provide at least one person who we should contact in case of emergency if you are assigned as a volunteer in Ramsey County. This information will only be made available to Ramsey County staff or volunteer coordinators on an as-needed basis.

1. First Name: \_\_\_\_\_

2. First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Other Information**

Please use this section to provide any additional information about your schedule availability, background and interests, reasons for wanting to volunteer, etc. that you think we should know in determining your fit as a volunteer with Ramsey County.

\_\_\_\_\_  
\_\_\_\_\_

**Internship information (for Intern applications only)**

If you are applying for a volunteer (UNPAID) internship assignment with Ramsey County, please describe your internship requirements you are seeking to fulfill (e.g., number of required hours)

\_\_\_\_\_  
\_\_\_\_\_

**Authorized Signature/MN Govt Data Pract Act Notice**

The Minnesota Government Data Practices Act requires you to be informed that the information you have been asked to provide on this form, in some cases, is considered PRIVATE Data and may be shared with Ramsey County staff, volunteer coordinators or others with a legitimate business need to access the information. You may refuse to provide any of the data requested on this form; however, refusal may result in denial of your application for volunteer assignment. The data you supply (such as demographic information) may be used in aggregate form (not identifying you individually) for reports and other statistical purposes.

By checking the "I agree" box,

\* I have read the application instructions and Minnesota Government Data Practices Act information related to data privacy.

\* I certify that the information provided on this application is true and complete to the best of my knowledge.

\* I also understand that I may be required to pass a background check process as part of this application.

\* I authorize Ramsey County to contact the references I provided on this form as well as previous employers and educational institutions to verify the information I have listed and release Ramsey County from any claims related to contacting these references.

\* I understand that if I am under age 18 that I have approval from my parent/guardian to accept this volunteer assignment.

\* I understand that Ramsey County will determine whether my interests, background, skills and availability match its volunteer needs and that this application does not guarantee a volunteer assignment or preference in connection with any application for paid employment I may later submit to Ramsey County.

\* I understand that, if accepted, I may be required to attend a volunteer orientation session or complete a training program prior to beginning a volunteer assignment.

By checking this box and signing this application form, I acknowledge this application for volunteer assignment has been carefully read and understood, and I accept the agreements herein.

I agree

Signature: \_\_\_\_\_ Date: \_\_\_\_\_