

PALM BAY VOLUNTEER SERVICE CORPS (PBVSC)

APPLICATION FOR MINORS

(under the age of 18 years)

Student's Name: _____
Last First Middle

Address: _____
Street name & number City State/Zip

Day Phone: _____ Other/Cell Phone: _____

E-mail Address: _____

Birthday: _____ Are you under 18? () yes () no Education (grade level): _____
Month/Day/Year

Parent or Legal Guardian's name: _____

Home address: _____ Day Phone: _____

Other/Cell phone: _____ Work phone: _____

Emergency contact: _____
Name Relationship Phone number

Is there a specific volunteer assignment you are interested in? _____

Days and hours available each week:
Mon. _____ Tues. _____ Wed. _____ Thur. _____ Fri. _____ Sat. _____ Sun. _____

What length of time are you available (1 month, 6 months, indefinite)? _____

Have you ever been a volunteer in the past? If so, where and when? _____

I agree to abide by and comply with all rules, regulations, policies and practices of the City of Palm Bay Government and with all procedures established for volunteers. I have read and understand the above.

Student's signature Date

Read this section carefully before you sign the application below.

Parental Permission Form

(Required for volunteers under age 18)

I hereby give my permission for my child to participate as a volunteer in the PBVSC program. I certify that each answer to the questions in this application and all other information provided by my child is true and correct to the best of our knowledge. We understand that any misrepresentation of facts shall be considered basis for rejection of this volunteer application or discharge if accepted. I authorize the City of Palm Bay to verify information listed in this application and to contact the listed references. I understand that a background screening will be conducted as it applies to the volunteer assignment in which my child has expressed an interest and I give my consent to the same.

Parent or Legal Guardian's signature Date