

## **VOLUNTEER/INTERN SERVICE APPLICATION**

| Full Name              |                         |   |                   | ı                            | NTERN [         | □ VOLUNTEER □        |
|------------------------|-------------------------|---|-------------------|------------------------------|-----------------|----------------------|
| Social Security Number |                         |   |                   |                              |                 |                      |
| Address                |                         |   |                   |                              |                 |                      |
| City/State/Zip         |                         |   |                   |                              |                 |                      |
| Email Address          | Cell Phone              |   |                   |                              |                 |                      |
| CA Driver's License N  | Expiration Date         |   |                   |                              |                 |                      |
| List Any Work Restric  | ctions or Limitations y | ou have:                                |                   |                              |                 |                      |
| Name of High School    | Graduated ☐ GED ☐       |   |                   |                              |                 |                      |
| College Attended:      |                         | Degree Received or #Units/Hrs Attended: |                   |                              |                 |                      |
| College Attended:      |                         |   | Degree Recei      | ived or #Units/Hrs Attended: |                 |                      |
| Please list your w     | ork experience b        | elow (if no prior work experien         | ce please state N | <i>IONE)</i> . Y             | ou may a        | lso submit a resume. |
| From:                  | То:                     | Name of Employer:                       |                   |                              |                 |                      |
| Job Title:             |                         |   | Salary:           |                              |                 | Hours Per Week:      |
| Job Duties:            |                         |   |                   |                              |                 |                      |
|                        | ,                       |   |                   |                              |                 |                      |
| From:                  | То:                     | Name of Employer:                       |                   |                              |                 |                      |
| Job Title:             |                         |   | Salary:           |                              |                 | Hours Per Week:      |
| Job Duties:            |                         |   |                   |                              |                 |                      |
|                        |                         |   |                   |                              |                 |                      |
| From:                  | To: Name of Employer:   |   |                   |                              |                 |                      |
| Job Title:             |                         |   | Salary:           |                              |                 | Hours Per Week:      |
| Job Duties:            |                         |   |                   |                              |                 |                      |
|                        |                         |   |                   |                              |                 |                      |
| From:                  | То:                     | Name of Employer:                       |                   |                              |                 |                      |
| Job Title:             |                         | Salary:                                 |                   |                              | Hours Per Week: |                      |
| Job Duties:            |                         |   |                   |                              |                 |                      |

| Criminal History: Have you ever been convicted or declared guilty (A conviction shall include a pleas, verdict or finding Please carefully read the following that you may of 1. Traffic violations for which the fine imposed w 2. Any offense committed prior to your 18 <sup>th</sup> birth 3. Any incident that has been sealed under Welfa 4. Convictions for violations related to marijuan predecessor thereof, or subdivision (c) of Sect and Safety Code prior to January 1, 1976, or a FAILURE TO DISCLOSE THIS INFORMATION WIL | g of guilt regardless of vomit:  as \$100 or less (Any transported or less)  are and Institutions Code of subdivision (b) or less (b) or le | whether sentence is impose<br>ffic violation over \$100 mu<br>djudicated in a juvenile cou<br>e Section 781 or Penal Code<br>(c) of Section 11357 of th<br>h and Safety Code, or Secti<br>hereof, two years from the | st be shown).<br>Irt or under a youth offence<br>e Section 120345.<br>e Health and Safety Code<br>on 11364, 11365, or 1155 | e or a statutory<br>0 of the Health                 |  |  |  |  |
|---|---|--|--|---|--|--|--|--|
|   |   |  |  |   |  |  |  |  |
| Are you related by blood or marriage to any person If YES, please provide: Full Name, Relationship, and   |   |  |  |   |  |  |  |  |
| If YES, please provide: Full Name, Relationship, and the Department in which the individual(s) are employed.  Have you been previously employed by the City of Fresno?  YES  NO If YES, please list Dates of Employment and position(s) held:   |   |  |  |   |  |  |  |  |
| Volunteers/Interns assigned work having disciplin<br>Services Department are required to complete a s<br>Code Section 5164).  |   |  |  |   |  |  |  |  |
| I understand that I must complete the attached the City of Fresno.  I understand and agree that any misstatements of Fresno. I understand that the City of Fresno may penalty of perjury under the laws of the State of Obelief.  | or omissions of materia<br>conduct a criminal and/  | I fact herein may cause te<br>or DMV background check  | rmination of my voluntary as permitted or required l   | y service to the City of<br>by law. I declare under |  |  |  |  |
| Signature:  | Date:   |  |  |   |  |  |  |  |
| DEPARTMENT USE ONLY:  |   |  |  |   |  |  |  |  |
| Project Sponsor (Department/Division, City Council  | ):  |  |  |   |  |  |  |  |
| Fund/Org:   | Badge: ☐ YES ☐  | NO   | Network Access: YES  | S 🗆 NO  |  |  |  |  |
| Project Start Date:   |   | End Date:  |  |   |  |  |  |  |
| Project Description and Location:   |   |  |  |   |  |  |  |  |
| Comments:   |   |  |  |   |  |  |  |  |
|   | 1   |  |  | l p.u.  |  |  |  |  |
| Approved by (print name):   | Signat  | ture:  |  | Date:   |  |  |  |  |



## WAIVER AND INDEMNITY AGREEMENT FOR VOLUNTEER SERVICE

| (Volunteer) is providing voluntary services to the City of Fresno In consideration of permitting Volunteer to serve, the Volunteer agrees to indemnify, hold harmless and defend City of Fresno and its officers, officials, employees, agents and other volunteers from and against any and all loss, liability, costs and damages (whether in contract, tort or strict liability, including but not limited to personal injury, death at any time and property damage) incurred by City of Fresno or any other person, and from any and all claims, demands and actions in law or equity (including attorney's fees and litigation expenses), arising or alleged to have arisen directly or indirectly out of the intentional act or willful misconduct of Volunteer related to its voluntary service to the City of Fresno.  |
|---|
| The Volunteer agrees that the City of Fresno and its officers, officials, employees, agents and other volunteers will not be liable for any loss or damage to Volunteer's owned, rented, leased, or loaned property or property in its care, custody and control. Further, Volunteer waives its right of recovery against the City of Fresno, its officers, officials, employees, agents and other volunteers for loss or damage to its owned rented, leased, or loaned property or property in its care, custody and control.  |
| The Volunteer, for him/herself, its heirs, executors, administrators or assigns agrees and understands that he/she has been designated a "Volunteer" in accordance with City of Fresno Resolution No. 2005-157 and is deemed to be an employee of the City of Fresno solely for the purpose of Workers Compensation coverage only while providing volunteer service, and agrees and understands that its sole and exclusive remedy for personal injury or death while performing services as a volunteer shall be a claim for Workers' Compensation benefits in accordance with the laws of the State of California. Further the Volunteer, for him/herself, its heirs, executors, administrators or assigns waives and relinquishes any interest or right to claim any interest in any other City of Fresno employment benefits offered employees of the City by reason of any common law employee rights theory or similar employment entitlements of any kind. |

The Volunteer agrees that the contents of this document shall be binding upon its heirs, executors, administrators and assigns.

The Volunteer acknowledges that he/she (i) has read and fully understands the content of this Waiver and Indemnity Agreement; (ii) has been fully and completely advised of the potential dangers incidental to providing the voluntary service to the City of Fresno; (iii) has had the opportunity to consult with its attorney, in its discretion; and (iv) is fully aware of the legal consequences of signing this document.

| Signature of Volunteer                                       | Date |
|--|------|
| Signature of Volunteer's Parent or Legal Guardian (if minor) | Date |
| Witness  | Date |

(Revised 01-04-2024)