



## VERNON PARKS AND RECREATION DEPARTMENT

120 SOUTH STREET, VERNON, CT 06066

Tel: (860) 870-3520

Fax: (860) 870-3525

www.vernonrec.org

### R.E.K. After School Program Volunteer Application

1. Personal information

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

Address: \_\_\_\_\_ Apt: \_\_\_\_\_

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

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

2. Previous or current employer. You can include previous volunteer experience in this section.

A. Name of organization: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Responsibilities during this position:

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

B. Name of organization: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Responsibilities during this position:

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

3. Please list any certifications or special skills you may have pertaining to this position:

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

4. Do you have any affiliations with the R.E.K. after school program? (friends, family, etc.)

Yes  No

If yes, what is the affiliation: \_\_\_\_\_

5. Please check which R.E.K. location(s) you are willing to travel to.

Center Road School  Skinner Road School

6. Please check which day(s) of the week you are willing to volunteer. Hours are 2:45pm-6:00pm.

Mondays  Tuesdays  Wednesdays  Thursdays  Friday

7. Please list two references. Do not include parent(s)/Guardian(s).

A. Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

B. Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

I certify that the information on this application is correct. I authorize the Vernon Parks and Recreation Department to contact my references to obtain information pertinent to my responsibilities as a volunteer at the R.E.K. after school program. I agree to abide by the policies, directives and laws of the Town of Vernon. I understand that this application is for a volunteer position, which includes no financial compensation.

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

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

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

Parent/guardian information if the applicant is under 18 years old;

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

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

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