

VENTURA COUNTY DISTRICT ATTORNEY VOLUNTEER APPLICATION

(Please print or type)

Name:	Date:	
Street Address:		
City:	State:	Zip Code:
Home Phone:	Work Phone:	
Cell Phone:	E-Mail:	
Emergency Contact Name and Telephone Number:		

Please list your last two employments (include volunteer experience)

Dates of Employment	Agency/Company Name	Telephone number & Supervisor's Name

Education/Special Training:

Special Skills, Areas of Interest, Hobbies, etc.

Have you ever worked or volunteered in the District Attorney's Office?

If yes, when and in what capacity? _____

Do you have a family member who is currently, or in the past, an employee of the District Attorney's Office? _____

Languages spoken other than English:

1.	Fluently <input type="checkbox"/>	Passably <input type="checkbox"/>
2.	Fluently <input type="checkbox"/>	Passably <input type="checkbox"/>

Volunteer Commitment:

We would like some estimates related to the amount of time you will be volunteering.

Please provide us with your estimated time commitment to the office during your assignment as a volunteer:

- 8-16 hours per week**
- 17-24 hours per week**
- More than 24 hours per week**
- Other (please list)** _____

Please provide us with an approximate length of time you would like to volunteer in the office:

- Three months/Summer Break
- More than three months
- Other (please list) _____

Time Availability (Check off as many as you like):

	Monday	Tuesday	Wednesday	Thursday	Friday
Mornings (8-12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoons (1-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please read the following statements carefully and print or type your name in the space provided below:

I understand that a background check will be conducted and references will be contacted as part of the volunteer application process.

Certificate of applicant: All answers and statements in this document are true and complete to the best of my knowledge and belief. I understand that untruthful and misleading answers are cause for rejection of my application or dismissal.

Date:	Name:
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