

## City of North Augusta Department of Public Safety

## **APPLICATION FOR VOLUNTEER WORK**

For additional information, please contact Linda Oliphant, Sergeant, Crime Prevention at 441-4256. The City of North Augusta considers prospective volunteers without regard to race,color, sex, age, religion, national origin or disability or military status.

PERSONAL:			
Name:	Street Address:		City, State, Zip:
Date of Birth: / /		Home Phone:	
Position you are applying for:	Clerical	ÿ Reception	ÿ Parking Enforcement
Do you have a Valid Driver's Licens	se: ÿ Yes	ÿ No	
If yes, please provide: State Classification Driver's License Number			
Have you ever been convicted or pled guilty or no contest to any crime other than minor traffic violations: ÿ Yes ÿ No			
If yes, please explain:			
Do you possess a high school education or equivalent: ÿ Yes ÿ No			
Special training or skills (languages, Machines, etc.):			
Membership in Professional or Civic Organizations:			
REFERENCES (Three references	<b>v</b> /		
Name:	Address:		Phone:
Name:	Address:		Phone:
Name:	Address:		Phone:
I affirm that all statements on this form are true and accurate. My background may be investigated, including a fingerprint check.			
Applicant's Signature		-	Date