



Clackamas County Circuit Court Volunteer Application

Last Name _____ First _____ Middle _____

Address _____ City/State _____ Zip _____

Phone _____ Email _____

School Attending _____ Grad. Year _____

VOLUNTEER EXPERIENCE:

EMPLOYMENT EXPERIENCE:

HOBBIES, SKILLS, SPECIAL INTERESTS:

Days preferred (check box)

Mon

Tue

Wed

Thurs

Fri

GOAL *State briefly what you wish to give or accomplish as a Clackamas County Circuit Court volunteer and what you hope to gain from this experience.*

REFERENCES whom we may contact. Please provide names and complete addresses of two people who are not family members or significant others.

Name _____ Relationship _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Name _____ Relationship _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Are there essential functions of your volunteer service assignment for which you would need a reasonable accommodation? (Check) Yes No If yes, please explain:

Volunteer Acknowledgement and Consent *(Please read and sign below)*

- 1) As part of the evaluation process, a criminal history background check will be obtained. I give Clackamas County Circuit Court permission to obtain information regarding previous employment and volunteer experience, criminal history, and to investigate all information provided during the application process.
- 2) I acknowledge that Clackamas County Circuit Court respects customers' rights regarding privacy information and I agree to respect these rights in the performance of my volunteer duties and adhere to confidentiality in all my statements both within and outside the court.
- 3) While present at Clackamas County Circuit Court, I will wear an identification badge at all times. If I misplace or forget my badge, I will let my department supervisor/manager know so they can assist me in checking out a temporary badge.
- 4) I understand that my assignment is completely voluntary. Clackamas County Circuit Court or I may end my volunteer service at any time. Advance notice is appreciated so the court may fill assignments. I may be removed from my assignment or moved to another assignment at any time. I understand that Clackamas County Circuit Court will attempt to accommodate but cannot guarantee my service assignment preference.
- 5) I understand that as a volunteer, I am not an employee of Clackamas County Circuit Court and therefore I will not receive any wages, salary, benefits, insurance, or any other compensation or remuneration for my services. I am volunteering to gain experience in the court and understand that volunteering is not a promise of future employment and is not a contract of any kind, whether expressed or implied, for employment or otherwise.

By submitting this application, I acknowledge that I have read and understand the above statements. I certify that all answers to questions in this application and all additional information I may have submitted are true and complete to the best of my knowledge. I understand that giving false information, misrepresenting facts, and material omissions may be grounds for denial and a permanent bar to volunteering with Clackamas County Circuit Court.

Volunteer Applicant Signature

Date

Volunteer Coordinator

Date



Disclosure and Authorization to Release Information

Name: _____
(Last) (First) (Middle Initial)

Social Security number (required): _____

Date of birth: _____

Please list any other names you have used: _____

Physical Address: (no P.O. Box) _____

City: _____ State: _____ Zip: _____

This release and authorization acknowledge Clackamas County Circuit Court may now or at any time while I am volunteering, conduct a verification of my education, previous employment/work history, and to receive any criminal record information pertaining to me which may be in the files of any Federal, State or Local criminal justice agency in the state. A photocopy or fax of this Authorization and Consent for Release of Information shall be valid as the original. The results of this verification process will be used to determine eligibility for volunteer assignments. All results will be kept confidential. The information obtained will not be provided to any parties other than to designated Clackamas County Circuit Court personnel.

Volunteer's name typed or printed: _____

Signature of volunteer authorizing release: _____ *Date:* _____