



**CITY OF ASHEVILLE  
VOLUNTEER/INTERN POSITION APPLICATION**

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

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you 18 years of age or older? Y N

List 2 Emergency Contacts:

1. Name/Relationship \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

2. Name/Relationship \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

Present Occupation: \_\_\_\_\_

Full time  Part time  Retired

Employed by: \_\_\_\_\_ Address: \_\_\_\_\_

Work Telephone (\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

Education: (Please circle completed years) 9 10 11 12, College 1 2 3 4, Graduate Degree, Ph.D.

Degree: \_\_\_\_\_ Field: \_\_\_\_\_

List Work Experience here or attach resume or work history: \_\_\_\_\_

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Other skills and/or certifications: \_\_\_\_\_

Do you speak a second language? \_\_\_\_\_ If so what? \_\_\_\_\_

Are you fluent? Y N Can you translate? Y N

Please share your Volunteer History: \_\_\_\_\_

I am interested in: \_\_\_ Volunteer Position \_\_\_\_\_ Unpaid Internship

\_\_\_ Specific Department or position (please list) \_\_\_\_\_

\_\_\_ Open for assignment

Please check Volunteer Skills and Interests:

- \_\_\_ Animal Support
- \_\_\_ Arts/Music/Drama
- \_\_\_ Building/Repair/Refurbishing
- \_\_\_ Board or Commission:  
List specific board or commission if applicable \_\_\_\_\_
- \_\_\_ Chaplaincy (for APD)
- \_\_\_ Computers/Technology/Web design
- \_\_\_ Crisis Support/Disaster Response
- \_\_\_ Disability Service
- \_\_\_ Environment/Planting/Cleanup (Outside activities)
- \_\_\_ Front Desk and Answering phone
- \_\_\_ Clerical/Office (data entry, word processing, filing, preparing mailings)
- \_\_\_ Grant writing/Fundraising
- \_\_\_ Guide/Docent
- \_\_\_ Literacy/Reading/Writing
- \_\_\_ Meal Service
- \_\_\_ Photography
- \_\_\_ Research
- \_\_\_ Sorting/Organizing/Cleaning
- \_\_\_ Special Events/Projects
- \_\_\_ Sports/Recreation
- \_\_\_ Teaching/Tutoring
- \_\_\_ Translation/Interpretation
- \_\_\_ Youth Programs/Mentoring
- \_\_\_ Communications/PR
- \_\_\_ Other:

Specify when you would be available for volunteer service:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings	_____	_____	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____	_____	_____
Evenings	_____	_____	_____	_____	_____	_____	_____

Preferred length of commitment: \_\_\_ Short term (6 months or less), \_\_\_ Long term (6-12 months), \_\_\_ Ongoing, \_\_\_ Special projects, \_\_\_ On-call as needed

How many hours a week would you be available? \_\_\_\_\_

Licensed Driver? Y N License # and State issued \_\_\_\_\_

How did you become aware of the opening? \_\_\_ City Webpage, \_\_\_ City eNews, \_\_\_ City Channel, \_\_\_ Newspaper, \_\_\_ Radio, \_\_\_ Hands On Asheville, \_\_\_ Land of Sky, \_\_\_ Current Volunteer or other Individual (Referred by \_\_\_\_\_), \_\_\_ Other: \_\_\_\_\_

List 3 references - 2 professional references and 1 personal reference

1.Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Relationship \_\_\_\_\_

2.Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Relationship \_\_\_\_\_

3.Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Relationship \_\_\_\_\_

Volunteer/Intern Placement: Volunteers will be selected and placed according to their skills, ability and interests. Applicants who do not match the needs of the organization will be referred to other community groups using volunteers and/or interns. The City of Asheville reserves the right to limit the use of volunteers and interns, adjust the hours of any volunteer or to reject services as it deems fit in order to comply with the guidelines and purpose of this program. Volunteers and interns reserve the right to refuse placement and ask for another situation.

I understand that by signing this Volunteer/Intern Application, I hereby grant the city permission to perform a check on my background, including criminal record, driving record, past employment, volunteer history and personal references. I understand that information collected during this background check will be limited to that appropriate to determining my suitability for particular types of volunteer work and that all such information collected during the check will be kept confidential. Any criminal convictions or other previous actions that would make acceptance of the applicant inappropriate will be cause for denial of placement. Decisions not to place a volunteer are final and no reason needs to be given for denial.

I certify, to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information I may be disqualified from consideration for receiving a volunteer assignment with the City of Asheville.

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Completed Applications can be returned to:

City of Asheville Volunteer Coordinator  
2<sup>nd</sup> Floor, City Hall or  
P.O. Box 7148  
Asheville, NC 28802  
Fax #: (828) 259-5499  
Email: [volunteer@ashevillenc.gov](mailto:volunteer@ashevillenc.gov)