

CITY OF LINCOLN RECREATION DEPARTMENT
... GET INVOLVED, MAKE A DIFFERENCE IN THE COMMUNITY ...
BECOME A YOUTH VOLUNTEER



APPLICATION DEADLINE: MAY 13 • VOLUNTEER ORIENTATION: MAY 20

CITY OF LINCOLN RECREATION YOUTH VOLUNTEER PROGRAM

GENERAL INFORMATION:

- Volunteer applications are being accepted for our Kids Kamp summer day camp program as well as our Aquatics programs.
- Volunteers must be a minimum of fourteen (14) years of age.
- Applications must be turned in no later than Friday May 13th, by 5pm. We are only accepting 10 volunteers for day camp and 10 volunteers for aquatics. An acceptance letter will be mailed by Friday, May 17th. If accepted into the program, volunteers must attend Volunteer Orientation.
- Mandatory Volunteer Training/Orientation is scheduled for May 20th from 4:30pm – 7:00pm at McBean Park Pavilion. Aquatics volunteers will have additional training on Tuesday, May 24th 5:00pm – 7:30pm at McBean Pool; Kids Kamp volunteers- June 9-10 at McBean Pavilion, time is still to be determined.
- Volunteers must be prompt and reliable in reporting for scheduled work. Volunteers must record hours worked by signing in or out when entering or leaving.
- Volunteers must notify the activity/program coordinator if he/she is unable to work by contacting their site activity/program coordinator by phone at least 48 hours in advance. This must be done to permit rescheduling of another volunteer if necessary.
- Volunteers will act as support for existing city operations and will be depended upon for planning, assisting, and improving the efficiency of the City of Lincoln with their direct community involvement.
- Volunteers are required work with a staff member.
- Volunteers will receive real world work experience and hands-on training.
- Volunteers must report any unusual activity or persons to the program/activity coordinator.

JOB DESCRIPTION:

Under the direction of the Recreation Supervisor, Senior Rec Aide, and Pool Manager/Assistant Pool Manager, Youth Volunteers may support, plan and/or direct recreation programs and activities during program hours listed. Programs may include arts and crafts, sports, camps, aquatics and field trips.

Qualifications:

A desire to work with children, good leadership skills, enthusiasm, creativity, basic knowledge of above mentioned activities, and reliable transportation to and from the program site.

- The City has the right to deny or dismiss a volunteer if he/she does not meet the needs of the program.
- Each volunteer must have a completed application with a parent/legal guardian signature on file prior to being considered for the Youth Volunteer Program.

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APPLICATION FORM pg. 1 of 2

Please select the area you would like to volunteer: Kids Kamp Aquatics

Youth Volunteer Name (first and last): _____

Age (as of June 6, 2016): _____ Grade: _____ School (Fall 2016): _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Alternate #: _____

Parent/Guardian Full Name: _____

Address (if different from above): _____

Phone Number: Home #: _____ Alternate #: _____

Emergency Contacts:

1. Name: _____ Relation: _____

Address: _____ Phone: _____

2. Name: _____ Relation: _____

Address: _____ Phone: _____

General Information

What are your hobbies?

Why do you want to volunteer?

How do you feel you will contribute to our program?

What are your future career goals?

What are your favorite school subjects? Least favorite?

What do you hope to gain from volunteering at the City of Lincoln?

What types of activities are you involved in at school/after school?

If applying for the aquatics, what is your swim ability? Beginning Intermediate Advanced

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APPLICATION FORM – Past Experience, References pg. 2 of 2

List any previous volunteer experience that qualifies you to be a Youth Volunteer: (if you do not have any previous volunteer experience, please skip down to "References")

1. Agency/Program: _____

Supervisor: _____ Phone: _____

Date of Volunteer Experience: _____ to _____
(month/year started) (month/year started)

Average # of Hours Volunteered: _____ per day week month

Duties & Responsibilities: _____

References:

Please list three (3) references that are familiar with you and any experience you may have that pertains to this application:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

The City of Lincoln does not have nor does it provide medical or accident insurance for persons involved in programs sponsored by the Recreation Department.

I/we _____ do further release, absolve, indemnify and hold harmless the organizer, sponsors and the coordinator appointed by them.

The Recreation Department is not responsible for any lost or stolen articles. The City will not be responsible for any volunteer on the premises when not attending or volunteering at a scheduled activity. All volunteers are required to abide by all rules set by the Recreation Department's Staff.

I/we give my/our child permission to be a Youth Volunteer for the City of Lincoln, Recreation Department.

Parent/ Guardian Signature

Date

*Please return this completed form to:
City of Lincoln Recreation Department
Attn.: Stephanie Lombardi
2010 First Street
Lincoln, CA 95648*