



Direct Involvement Recreation Teaching

Learn by Doing...and Grow!

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VOLUNTEER APPLICATION FORM

Date: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (_____) _____ Cell Phone: (_____) _____

Email Address: _____ DOB: _____ Driver Lic # _____

Immediate past employment or volunteer position:

Employer: _____

Address: _____

City/State/Zip Code: _____

Immediate Supervisor: (Name) _____

Phone Number: _____ Date Started: _____ Date Ended: _____

Job Duties: _____

Personal reference: ***(Please do not include family members)***

Name: _____

Address: _____

City/State: _____ Zip Code: _____

Daytime Phone Number: _____

How did you hear about DIRT? _____

Circle days you can volunteer: MON TUES WEDS THURS FRI SAT

DIRT may perform a background check on new volunteers.

Signature _____

Thank you for your interest in helping others.