

STATE PARKS VOLUNTEER APPLICATION

NAME (First, MI, Last)	HOME PHONE NO.	ALTERN	ATE PHONE NO.	EMAIL ADDRESS
STREET ADDRESS		CITY/ST	ATE/ZIP CODE	
IF UNDER AGE 18, PROVIDE NAME, ADDRESS AND PHONE NO. OF PARENT OR GUARDIAN				
HAVE YOU EVER SERVED AS A CALIFORNIA STATE PARKS VC		s (List locations and a	approximate dates be	low.) 🛄 No
POSITION YOU ARE SEEKING		PARK PREFERENCE,	IF KNOWN	
WHY DO YOU WISH TO BECOME A STATE PARK VOLUNTEER?				
CURRENT OCCUPATION				
(You may attach a resume.)				
LIST THREE PERSONS NOT RELATED TO YOU WHO KNOW OF	YOUR WORK QUALITY			
<u>Name</u>		Phone No.	<u>Rei</u>	<u>ationship</u>
FOR CAMPGROUND HOST APPLICANTS ONLY				
INDICATE YOUR CHOICE OF STATE PARK AND DATES AVAILABLE (Minimum of 30 days, maximum of 6 consecutive months in one park.)				
First Choice Dates A	vailable	Second Choice		Dates Available
INDICATE TYPE OF EQUIPMENT AND LENGTH				
Camper: Motorhome: IF APPLICABLE, INDICATE TYPES AND NUMBER OF PETS YOU	Trailer:	(You must have proc	Extra Vehicle	
you reside in the park as a campground host.)				
Dogs: Cats:	Other:			
CERTIFICATION				
I understand that additional information, such as driver's license, Social Security Account Number and a background check may be required for certain volunteer positions. I hereby certify that all statements made on this application are true and complete.				
Applicant Signature			Date	e