

WORK/VOLUNTEER HISTORY**

May we contact your present employer? () Yes () No

| | | |
|--|-----------------------------|----------------------------|
| | | |
| Present or most recent employer or volunteer experience | Address | Phone |
| | \$ _____ per month | |
| Date Started | Starting Salary | Starting position |
| | \$ _____ per month | |
| Date Left | Current or Ending Salary | Current or Ending position |
| | | |
| Name and Title of Supervisor | Name and Title of Co-worker | |
| Description of Duties | | |
| | | |
| | | |
| Reason for Leaving | | |
| | | |

****USE ADDITIONAL SHEETS IF NECESSARY TO INCLUDE WORK EXPERIENCE FOR THE LAST FIVE (5) YEARS. INCLUDE MILITARY OR VOLUNTEER EXPERIENCE****

HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

In consideration of the City of Covina furnishing facilities, supervisors, equipment or expenses, I agree to hold harmless and release the City, its officers and its employees, on behalf of myself, my heirs, assignees, administrators and executors, from any and all rights and claims for damage or injuries to property and/or person which undersigned may sustain or incur as a result of use of or participation in the activities, events or property provided by the City.

Date: _____ Signature of Volunteer: _____

Signature of responsible adult if
Volunteer is under 18 years of age: _____

I hereby certify that all facts set forth in this form are true and complete to the best of my knowledge. I understand that if I become a volunteer, falsified statements made on this form shall be considered sufficient cause for dismissal. I further understand that becoming a volunteer is contingent upon successful completion of a reference check and/or background investigation. The City is hereby authorized to make investigation of my prior educational and work history, and contact supervisors and coworkers shown above. I further understand that the City reserves the right to dismiss volunteers at will.

Signature of Volunteer Date

For Office Use Only: Interview Date: _____ DOB: _____ Ref/Bckgrnd Check: _____
 Placed: _____ Not Placed: _____ No Show: _____ Orientation Date: _____
 Additional Comments/Information:

