Volunteer Program – City Hall



This position serves the information desk on the first floor at City Hall for the City of Harrisonburg. Volunteers provide a positive first impression of the city. Duties include, but not limited to, greeting guests, answering incoming calls, and hearing the needs of visitors and referring to proper department for disposition.

Date:			(Please t	ype or print clearly)	
Name [.]		Na	me I prefer to be called		
(Last)	(First)	(M.I)	ine i prefer to be carred		
Mailing Address:		Zip Code :			
(If different) Home Address :			Zip C	ode:	
		Alternate Phone:			
E-mail:			Harrisonburg resid	ent for years.	
Bilingual: Speak		Read	Write		
Were you referred b	oy anyone: Yes No 1	Name of Referring Par	ty:		
How did you hear al	bout volunteering oppo		ebsite Council Meeti		
Employment Experi	ence:				
Volunteer Experienc	ce:				
1 - 4.5 hour sh	nticipate volunteering? nift a week 2 - 4.5 h		Other		
Days/Times most Av	ailable:				
Monday	Tuesday	Wednesday	Thursday	Friday	
8:00 a.m 12:30 p.m.	8:00 a.m 12:30 p.m.	8:00 a.m 12:30 p.m.	8:00 a.m 12:30 p.m.	8:00 a.m 12:30 p.m.	
1 1:411 10 100 5:1111 10 100	1 1: 411 to too 5:1111 to too	1 1:411 10 100 5:1111 10 100			

Monday	Tuesday	Wednesday	Thursday	Friday
8:00 a.m 12:30 p.m.				
12:30 p.m 5:00 p.m.				

Available Start Date:	

Poforonog (Two paraons	not related to you).		
References (Two persons in	not related to you):		
Name	Address	Phone	
1.			
2.			
Any other information or	special skills that you process?		
·			
In case of EMERGENCY	, contact:		
Name:	(First)	Relation:	
(Last)	(First)	(M.I)	
Phone Number:	Altern	nate Phone:	
Home Address:		Zip Code:	
I,	, volunteer my services to	o the City of Harrisonburg. I understand risonburg to use my photograph for pro-	d that I am
not a paid employee. I give	e my permission to the City of Har	risonburg to use my photograph for pro	omotional
	d check. I am at least 18 years old	cation is subject to verification and I co.	nsent to a
, C	Ž		
Signature:		Date:	

Why do you wish to volunteer?

-Please return completed application to the City Manager's Office-409 S. Main Street, Harrisonburg, VA 22801 Tel:(540)432-7701 Fax:(540)432-7778 E-mail:Erica.Kann@harrisonburgva.gov