



County of Monterey  
**Volunteer Program**

Office of Emergency Services  
1322 Natividad Rd, Salinas CA 93906  
Info.oes@co.monterey.ca.us

## Application

Position of Interest:		Date:	Office Use Only		
			Code	Date of Ref.	Status
First Name:	Last Name:				
Address:					
City:	State, Zip Code:				
Email address:					
Home Phone:	Cell Phone:	Work Phone:			

**GOALS through volunteering** (contribute to the community, gain work experience, school credit...)

### SUMMARIZE YOUR WORK HISTORY

Current job title & employer:

Brief description of present duties:

Brief summary of employment history:

### RELEVANT EDUCATION

If enrolled, school now attending:  SRJC  SSU  Other:

Major: List any degrees previously earned:

### RELEVANT COURSE WORK, COMPUTER, SPECIAL SKILLS, CERTIFICATES, OR LICENSES

