



1100 E. MARINA WAY, SUITE 215, HOOD RIVER, OR 97031  
 (541)386-2010 FAX (541)386-4597 [www.mcccheadstart.org](http://www.mcccheadstart.org)

## Volunteer Application

Name: \_\_\_\_\_

Phone (Primary) \_\_\_\_\_ (Alternate Number) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Are you Bilingual?  Yes  No language(s) \_\_\_\_\_

Please complete:

MCCC Center Name: _____	Schedule Preference: Day(s) _____	How often _____ <input type="checkbox"/> 9:30 - 11:30AM <input type="checkbox"/> 1:30 - 3:30PM
Volunteer Area(s) of Interest <input type="checkbox"/> Classroom Aide <input type="checkbox"/> Greeter <input type="checkbox"/> Reading <input type="checkbox"/> Home Projects <input type="checkbox"/> Office Assistant <input type="checkbox"/> Food Service Support <input type="checkbox"/> Other _____	Which age group would you prefer to spend time with? <input type="checkbox"/> 0-3yrs <input type="checkbox"/> 3-5yrs <input type="checkbox"/> Either	Other skills or talents you would like to contribute?

EQUAL OPPORTUNITY

Mid-Columbia Children’s Council, an equal opportunity employer, complies with provisions of all Federal and State statutes relating to nondiscrimination, such as Fair Practices Act, section 504 of the rehabilitation Act, and Title IX Regulations.

DRUG-FREE WORKPLACE

Mid-Columbia Children’s Council is committed to maintaining a drug-free workplace and strictly complies with the Drug-Free Workplace Act of 1988.

AMERICANS WITH DISABILITIES ACT

Mid-Columbia Children’s Council complies with provisions of the Americans with disabilities Act of 1990. Reasonable accommodations for the application and interview process will be provided upon request and as required. Disabled persons may contact the Human Resource office for additional information or assistance.

All employees, consultants, contractors, and volunteers of Mid-Columbia Children’s Council (MCCC) are expected to maintain the highest standards of professional and ethical conduct. They are required to understand and abide by the Code of Conduct and Professional Ethics as set forth in the Federal Performance Standards - 45 CFR 1302.47(b)(5); 1302.90(c)(1)(2); 1303(C).

**I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or material omission on this application will be considered sufficient cause to disqualify me for volunteer opportunities with MCCC. I understand and agree to MCCC performing a criminal background check, communicable disease screening, and all other contingencies required for this position.**

Applicant Signature: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_