



OREGON STATE PARKS AND RECREATION DEPARTMENT

PARK HOST – VOLUNTEER APPLICATION (Please complete one application for each host applicant)

Last Name : _____ First Name: _____ Middle Initial: _____

Mailing Address:	Winter/Alternate Address
Street	Street
City, ST, Zip	City, ST, Zip
Phone:	Phone:
Alt/Cell/Message Phone:	Alt/Cell/Message Phone:
Dates at this address:	Dates at this address:

Email Address: _____ Will you have a pet with you? Yes ____ No ____
(Current rabies vaccination certificate required, bring a copy with you)

Volunteer Skill Assessment - I have skills/experience/interest in the following areas:

<input type="checkbox"/> Athletics/Sports (ath)	<input type="checkbox"/> Engineering/Planning (eng)	<input type="checkbox"/> Recreation Programs (rcp)
<input type="checkbox"/> Accounting/Bookkeeping (act)	<input type="checkbox"/> Event Coordination (evt)	<input type="checkbox"/> Routing/Trail Signs (sgn)
<input type="checkbox"/> Bird/Animal Identification (aml)	<input type="checkbox"/> Fund Raising (fdr)	<input type="checkbox"/> Safety Training (sft)
<input type="checkbox"/> Boating Certificate (btcrf)	<input type="checkbox"/> Interpretation (int)	<input type="checkbox"/> First Aide (fsa)
<input type="checkbox"/> Botany/Plant ID (bot)	<input type="checkbox"/> Lighthouse History (LhH)	<input type="checkbox"/> Teaching Campfire Programs (tch)
<input type="checkbox"/> Clerical/Secretarial (clr)	<input type="checkbox"/> Maintenance/Repairs (mnt)	<input type="checkbox"/> Training/Supervision (trn)
<input type="checkbox"/> Carpentry (crp)	<input type="checkbox"/> Masonry/Concrete (msn)	<input type="checkbox"/> Writing or Publications (wrt)
<input type="checkbox"/> Computer/Data Entry (cmp)	<input type="checkbox"/> Photography/Drawing (pho)	<input type="checkbox"/> Other interests: _____
<input type="checkbox"/> Crafts (cft)	<input type="checkbox"/> Research/Statistics (res)	_____
<input type="checkbox"/> Children & Youth Programs (yth)	Other Languages: _____	_____
<input type="checkbox"/> Customer Service Exp. (cse)		

Volunteer Type: Campground Host Program Host Caretaker Host Standby Host Yurt Host

Area/Park Preferred: 1st _____ 2nd _____
3rd _____ 4th _____

Other areas you will consider: _____

List all available dates: _____ thru _____

(And/Or): _____ thru _____

Previous/Current Occupation: _____ Retired?: _____

Have you ever been a host at other parks? No Yes If yes, please list the latest parks and dates:

Park: _____ Dates: _____

Park: _____ Dates: _____

Driver's License Number: _____ State of Issue: _____ Exp Date: _____

(Out of state residents, who may drive state vehicles, must present a current motor vehicle driving record upon assignment.)

Personal/Professional References	Address, City, State, Zip & Phone	# of Years

Do you have current CPR certification? No Yes Expiration Date: _____

Do you have any medical/physical conditions we should consider when assigning tasks? _____

Have you been convicted of a felony? No Yes If Yes, explain include date(s): _____

Type, size or length of equipment: _____ Extra vehicle? No Yes

How did you learn about our Host Program? _____

Anything else you would like us to know about you? _____

I, _____, hereby certify the information provided by me on this application is true and correct to the best of my knowledge and belief. I hereby grant the State of Oregon, Oregon Parks and Recreation Department (OPRD), my permission to verify facts contained in this application. I hereby authorize the release of any relevant information such as reference checks, driving records, criminal history, education, work history and background for verifying my eligibility to volunteer at Oregon Parks and Recreation Department (OPRD):

Applicant's Signature: _____ **Date:** _____

For Current and Returning Oregon State Park Hosts:

I do ___ do not ___ have an OPRD volunteer host uniform (vest, hat or visor) Vest Size: S M L XL XXL XXXL 4XL

I do ___ do not ___ have a volunteer name tag. Name as you'd like it to appear on tag: _____

I do ___ do not ___ have a park host sign for my RV site. Name as you'd like it to appear on sign: _____

I do ___ do not ___ have a completed volunteer *basic* safety module training card. Issued on (date:) _____

I do ___ do not ___ have a Host Insurance ID Card. Issued on (date:) _____

I have been a volunteer for ___ years at OPRD and have approximately ___ total hours logged.

Salem HQ and Park Staff Use Only:

Date Application Received: _____ ACTION: Contacted via: Phone Fax E-Mail Snail Mail

Interview Results: _____

Site(s) Scheduled: _____ Assignment Date(s): _____

Date entered in database: _____ By: _____

Host ___ is ___ is not, available for other assignments after _____

SEND APPLICATION MATERIALS TO:

Volunteer/Host Coordinator
Oregon Parks & Recreation Dept.
725 Summer Street NE, Suite C
Salem, OR 97301-1271

OPRD Salem Headquarters: 503-986-0707
Toll-free Volunteer Hotline: 1-877-225-9803
Direct Line: 503-986-0752 or 986-0751
Fax: 503/986-0792
Website: www.oregonstateparks.org