



Volunteer Approval Form

Pursuant to the Volunteer Government Workers Act, Utah Code Chapter 20

Employee Information

Name: _____ Phone Number: _____
Address: _____ City, State: _____ Zip: _____
Driver's License State of
Number: _____ Issuance: _____
Date of Birth: _____ Social Security Number: _____
Emergency Contact: _____

These responses are necessary to conduct a background check (see below):

- Have you ever been employed by the City of Orem?
 - If yes, when? _____ and what was your title? _____
- Have you ever been convicted of any violation of the law (traffic violations excluded)?
 - If yes, please attach a document explaining

Volunteer Code of Conduct

As a volunteer I will perform only those assigned tasks that are within my physical capability and will not undertake tasks that are beyond my physical capability or ability. I will not undertake to use any equipment or tools that I am unfamiliar with or have not been trained to operate properly and safely. As a volunteer, I will strictly observe all safety rules and use care in the performance of my assigned tasks.

As a volunteer, I will treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration. While volunteering, I will not use profanity or make humiliating, ridiculing, threatening, or degrading statements.

Volunteer Acknowledgements and Waivers

Many volunteer positions with the City involve working with children or in other safety sensitive positions. To help safeguard the public, the City will perform a background check on all volunteers.

Volunteer Acknowledgements and Waivers Cont.

As a condition of volunteering, I give the City of Orem permission to conduct a thorough background check on me, which may include a review of sex offender registries, criminal history records, driving records, and federal FBI records. I understand that all volunteer positions are conditioned upon the City never receiving inappropriate information on my background.

I understand that volunteer positions are charitable contributions to the City of Orem without anticipation of compensation or any kind or consideration of future employment.

As a volunteer I agree to be subject to the policies and procedures of the City of Orem.

Your signature below indicated that you have read each of the above items and you agree to be bound by them. If you are under that age of eighteen, your parent or guardian must also review these items and sign below.

Signature of Volunteer: _____ Date: _____

I, _____, am the parent or legal guardian of _____
and I agree to allow him/her to be bound by the conditions represented above.

Parent/Guardian Signature: _____ Date: _____

OFFICE USE ONLY

City Manager Approval: _____

Date Signed: _____

HR Approval: _____

Date Signed: _____