

MONTGOMERY VILLAGE FOUNDATION
10120 Apple Ridge Rd., Montgomery Village, MD 20886 301-948-0110

DEPARTMENT OF RECREATION, PARKS AND CULTURE
APPLICATION FOR VOLUNTEER COUNSELOR-IN-TRAINING POSITION

Please return to Melanie Maggi by Wednesday April 25

APPLICANTS MUST BE 14 YEARS OF AGE OR OLDER BY THE FIRST DAY OF THEIR ASSIGNED SESSION.

Indicate all positions applied for by designating First Choice (1), Second Choice (2), and Third Choice (3)

VOLUNTEER POSITIONS AVAILABLE

CAMP TINY FEET

Located at Whetstone Community Center
19140 Brooke Grove Ct.
For ages 4-5
Hours required: 8:45 a.m. – 12:45 p.m.

LAKE MARION CAMP

Located at Lake Marion Community Center
8821 East Village Ave
For ages 6-12
Hours required: 8:45 a.m. – 4:15 p.m.

NORTH CREEK SUMMER CLUB

Located at North Creek Community Center
20125 Arrowhead Rd.
For children entering ages 6-13
Hours required: 8:30am – 5:30 p.m.

***Selected volunteers are scheduled to work specific weeks of the summer based upon their noted availability.**

Name: _____ **Date:** _____

Age: _____ **Please give date of birth:** _____

(Please note: Applicants must be 14 yrs. of age or older by the first day of their assigned session).

Address: _____

City

State

Zip

Email address: _____

Telephone: cell _____ home _____

Dates Available to Volunteer: (check all that apply)

June 18-22

July 23-27

June 25-29

July 30-Aug. 3

July 2-6 (excluding July 4)

Aug. 6-10

July 9-13

Aug. 13-17

July 16-20

Have you ever volunteered for the Montgomery Village Foundation? Yes _____ No _____

If yes, please give dates/program _____

The Montgomery Village Foundation is an equal opportunity employer

T-Shirt Size: Adult Small Adult Medium Adult Large Adult Extra Large

EDUCATION RECORD

Name and Location of School	Highest Grade Completed
School Currently Attending:	

REFERENCES

Please list two personal references (only include people **who are not relatives** and who know you well).

Name _____	Relationship to Applicant _____
Address _____	
Phone # (home) _____	(work) _____
Name _____	Relationship to Applicant _____
Address _____	
Phone # (home) _____	(work) _____

RELEASE

I, _____, hereby authorize Montgomery Village Foundation, Inc., its agents and representatives to obtain a full disclosure from my previous employer(s) listed above, or provided separately by me, of any information concerning my previous employment, either oral or written. I indemnify and hold harmless any person of whom this request is presented and its agent and employees from and against all claims, damages, losses and expenses arising out of or by reason of complying with this request. A photocopy or facsimile of this authorization will be valid as an original, even though the photocopy or facsimile does not contain an original writing of my signature. This authorization expires at midnight on _____, 20_____.

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application may be considered sufficient cause for dismissal.

Signature _____ Date _____

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

Signature Acknowledging This Notice _____