



Application: Red Cross Volunteer at Camp Pendleton

Thank you for your interest in applying to be a registered American Red Cross Volunteer at Camp Pendleton! By completing this application you are one step closer to joining one of the most respected and largest humanitarian organizations in the world. Please return to: Red Cross at NHCP, Box 555191, Code OOSM-PC, Camp Pendleton, CA 92055-5191; fax 760-725-6439

Name

*First Name: _____ Middle Name: _____
*Last Name: _____ Title: _____ Suffix: _____

Address

*Address Type: Home Mailing Work University Seasonal
*Street Address: _____ Apt/Suite: _____
*City: _____ *State: _____ *Postal Code: _____ *County: _____

Contact Information

*Email: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ **One phone number is required*

Emergency Contact Information

Required
First Name: _____ Last Name: _____
Email: _____ Relationship: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ *At least one phone number is required*

Optional
First Name: _____ Last Name: _____
Email: _____ Relationship: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____

Additional Information

*Date of Birth: _____ (mm-dd-yyyy)

Occupation: _____

Employer: _____

Current School: _____

Expected Graduation Date: _____

Professional Licenses: _____

Languages (please include fluency level): _____

▼ Life Experience/Skills

Check all applicable boxes:

Hospitality

- | | |
|---|---|
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Cooking Prep |
| <input type="checkbox"/> Food Service | <input type="checkbox"/> Greeter |
| <input type="checkbox"/> Hotel Management | <input type="checkbox"/> Kitchen Management |
| <input type="checkbox"/> Planning Events | <input type="checkbox"/> Recreation/Games |

Logistics

- | | |
|---|--|
| <input type="checkbox"/> Dispatch | <input type="checkbox"/> Driving (car/light truck) |
| <input type="checkbox"/> Inspector | <input type="checkbox"/> Inventory |
| <input type="checkbox"/> Ordering Supplies | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Safety and/or Security | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Warehouse | |

Technology

- | | |
|--|---|
| <input type="checkbox"/> Computer Networking | <input type="checkbox"/> Radio Systems |
| <input type="checkbox"/> Satellite Systems | <input type="checkbox"/> Systems Administration |
| <input type="checkbox"/> Telephone Systems | |

Administration

- | | |
|---|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Basic Computer Skills |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Courier |
| <input type="checkbox"/> Data-Entry | <input type="checkbox"/> Databases |
| <input type="checkbox"/> Filing/Sorting | <input type="checkbox"/> Instruction/Facilitation |
| <input type="checkbox"/> Mail Distribution | <input type="checkbox"/> Personnel Management |
| <input type="checkbox"/> Project Management | <input type="checkbox"/> Research |
| <input type="checkbox"/> Supervision | |

Communications

- | | |
|---|---|
| <input type="checkbox"/> Interpreter (Spoken) | <input type="checkbox"/> Interviewing |
| <input type="checkbox"/> Marketing/Sales | <input type="checkbox"/> Media Relations |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Social Media, i.e. Twitter, Facebook, etc. | <input type="checkbox"/> Translator (Written) |
| <input type="checkbox"/> Video/Film | <input type="checkbox"/> Writing |

Specialty Skills/Experiences

- | | |
|---|--|
| <input type="checkbox"/> Certified Forklift Operator | <input type="checkbox"/> Certified Health Professional |
| <input type="checkbox"/> Certified HR Professional | <input type="checkbox"/> Certified Mechanic |
| <input type="checkbox"/> Fire Department Experience | <input type="checkbox"/> Law Enforcement Experience |
| <input type="checkbox"/> Licensed Amateur Radio Operation | <input type="checkbox"/> Licensed Child Care Worker |
| <input type="checkbox"/> Licensed Medical Professional | <input type="checkbox"/> Licensed Mental Health Professional |
| <input type="checkbox"/> Licensed Teacher | <input type="checkbox"/> Military |
| <input type="checkbox"/> Valid Commercial Drivers License | |

*Have you been convicted of a misdemeanor in the past 24 months? Yes No

If yes, please explain: _____

*Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

*How did you hear about us? _____

*I verify that all of the above information is true, complete, and correct, and I understand that if it is not, I am disqualifying myself for a volunteer/intern position. I also understand that I am applying for a volunteer/intern position and that this is not an application for, nor a contract of paid employment. I further agree that as an American Red Cross volunteer, I will not accept any payment for my services. I will also take required training where applicable. I authorize any verification of applicable licensure if it is required for my volunteer position.

Volunteer Position Details

Visit our website to view a current listing of volunteer services. We have a place for you; if not we will find one for you!

Please indicate the positions you wish to apply for:

First Choice: _____ Second Choice: _____

Availability						
<input type="checkbox"/> Monday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Tuesday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Wednesday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Thursday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Friday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Saturday <input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Sunday <input type="checkbox"/> Day <input type="checkbox"/> Evening
Hours Available: _____						

References

You will find 2 reference forms included with this application. Please list the names of two references here. Include people with whom you have worked or volunteered. Exclude relatives.

Naval Hospital Camp Pendleton Photo Release

I give to the Naval Hospital Camp Pendleton, its designees, agents, and assigns, unlimited permission to use, publish and republish in any form or media, reproductions of my likeness (photographic or otherwise), with or without identification of me by name. (If you are not comfortable having your photograph taken and used by the Naval Hospital Camp Pendleton you may disregard this section.)

Volunteer Signature: _____

Date: _____

Signature of Parent if applicant is under 18: _____

Date: _____

