



**EQUAL
ACCESS
OFFICE**

BILINGUAL VOLUNTEER APPLICATION

Date: _____ Referral By: _____

Social Security Number: --

Name: _____
Last First MI

Address: _____
Number Street Apt. No.

City State Zip

Home: -- Mobile: --

E-mail Address: _____

Do you have a valid driver license, ID number or passport number? No Yes: _____

What is the highest level of education completed? _____

Major area of study: _____

Do you speak or read any foreign languages? No Yes: _____

List the types of equipment and software programs you have worked with (i.e., copier, fax, telephone, and computers): _____

Have you ever done any volunteer work? No Yes

If "YES", when and with what organization: _____

What special hobbies or interests do you have? _____

What special skills do you have? _____

| EAO Office Use Only | | | |
|---------------------|--------------------------------|---------------------------------------|-----------------------------------|
| Language: _____ | | | |
| <i>Reading:</i> | Basic <input type="checkbox"/> | Intermediate <input type="checkbox"/> | Advanced <input type="checkbox"/> |
| <i>Spoken:</i> | Basic <input type="checkbox"/> | Intermediate <input type="checkbox"/> | Advanced <input type="checkbox"/> |
| <i>Written:</i> | Basic <input type="checkbox"/> | Intermediate <input type="checkbox"/> | Advanced <input type="checkbox"/> |



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BILINGUAL VOLUNTEER APPLICATION (CONTINUE)

Are you a resident of City of Oakland? Yes No

* **The City of Oakland City Manager’s Equal Access Office requests a minimum of (8) eight weekly volunteer commitment hours for a minimum of (8) eight weeks.** Are you willing to commit to this duration of time? Yes No

The Equal Access Office’s Volunteer Hours are Monday through Thursday 10:00 am to 4:00 pm. What days and times are you available to volunteer?

Please check box(es) for the time that you are available. Scheduled volunteer hours will be based on the box(es) you checked.

Monday:
09:00 AM – 01:00 PM 12:00 PM – 04:00 PM

Tuesday:
09:00 AM – 01:00 PM 12:00 PM – 04:00 PM

Wednesday:
09:00 AM – 01:00 PM 12:00 PM – 04:00 PM

Thursday:
09:00 AM – 01:00 PM 12:00 PM – 04:00 PM

Evaluations will be conducted every 2 weeks to determine if this assignment is mutually agreeable for both parties. City of Oakland City Manager’s Equal Access Office has the right to terminate any volunteer position at any time.

DISCLAIMER: I understand this is strictly a volunteer position and I will not presume, under any circumstance, this is a guarantee for future employment at the City of Oakland City Manager’s Equal Access Office and/or any other City departments and its divisions.

Volunteer Candidate Signature: _____

Date: ____/____/____



**EQUAL
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BILINGUAL VOLUNTEER QUESTIONNAIRE SURVEY

Name: _____

Date: ____/____/____

What do you know about the Bilingual Volunteer Program from the City of Oakland City Manager's Equal Access Office?

Why do you want to volunteer your time with the City of Oakland City Manager's Equal Access Office?

What qualities and experience do you bring to the City of Oakland City Manager's Equal Access Office?

What are your expectations from the City of Oakland City Manager's Equal Access Office?

COMMENTS: _____

