



Thank you for your interest in the Volunteer Program at Longview Parks & Recreation. We are committed to creating community through people, parks & programs. We are seeking volunteers who are willing to commit to a minimum of two (2) hours per week and at least 50 hours of service.

Longview Parks & Recreation provides volunteer opportunities in a variety of facilities and services. Volunteers have an important role in helping serve the Longview community. Our volunteers are special people who choose to give their time, talents and energy to improve the lives of others. If you are interested in volunteer opportunities, please consider joining us in "Being the Good" for our community!

### VOLUNTEER POSITIONS AVAILABLE

- Day Camps
- Recreation & Special Events
- Therapeutic
- After School Programs
- Special Olympics

### APPLICATION PROCESS

- Complete volunteer application and background check form;
- Volunteer candidates selected to proceed to interview process;
- Interview process;
- Notification of placement;
- Orientation scheduled –
  - City of Longview safety meeting;
  - Program overview and expectation review with supervising staff,
  - Scheduling coordination;
- First volunteer shift

For questions, please contact us:  
2920 Douglas St. Longview, WA 360.442.5400



## Volunteer Positions

Position:	Day Camps
<b>Description:</b>	Assist lead staff with summer day camps. Duties may include but not limited to: Preparing supplies, teaching specialty lessons, arts & crafts, songs, reading, sports, and games.
<b>Hours:</b>	Vary according to camp
<b>Frequency:</b>	Camps run Monday-Friday
<b>Locations:</b>	Varied locations
<b>Ages:</b>	5-12 years of age
<b>Preference:</b>	Knowledge of science, art or teaching experience.
<b>National &amp; Washington State Criminal Background Check Required</b>	

Position:	Recreation & Special Events
<b>Description:</b>	Assist with planning, fundraising, marketing, event set-up, security and set-up/clean-up of a variety of community-wide special events including Extreme Machines, Photo Show, Breakfast with Santa, Father Daughter Ball, Earth Day, Turkey Trot, and the Summer Concert series.
<b>Hours:</b>	Vary according to event or program
<b>Frequency:</b>	Vary according to the event or program
<b>Location:</b>	Vary according to the event or program location
<b>Ages:</b>	All ages
<b>Preference:</b>	Ability to be flexible, enjoy working with people.
<b>National &amp; Washington State Criminal Background Check Required</b>	

Position:	Therapeutic
<b>Description:</b>	Volunteers needed to assist with planning and conducting activities and special events for adults with developmental disabilities. Assistance needed with preparing bingo, dances, art projects, and contests.
<b>Hours:</b>	3 hours a week
<b>Frequency:</b>	Every Saturday
<b>Location:</b>	Elks Building, 2121 Kessler Blvd
<b>Ages:</b>	18+
<b>Preference:</b>	Experience working with disabled adults.
<b>National &amp; Washington State Criminal Background Check Required</b>	

<b>Position:</b>	<b>After School Programs</b>
------------------	------------------------------

**Description:** Assist staff in programmed activities. Duties may include but not limited to: assist in organization and participation in games, sports, arts & crafts, songs, reading, assist with homework, preparation of daily supplies, and teaching specialty activities.

**Hours:** 3:00 – 5:30 pm

**Frequency:** Monday - Friday on school days

**Location:** Robert Gray, Kessler, CVG, Northlake Elementary Schools and Highlands Community Center

**Ages:** K-5<sup>th</sup>

**Preference:** Education/Teaching experience, enjoy working with children.

**National & Washington State Criminal Background Check Required**

<b>Position:</b>	<b>Special Olympics</b>
------------------	-------------------------

**Description:** Volunteers needed for coaching, chaperoning & fundraising. Interacting with developmentally disabled athletes and helping them learn and participate in various sports throughout the year (Basketball, Track, Swimming, Soccer, Softball, Golf, Bowling and Flag Football).

**Hours:** 2-4 hours a week

**Frequency:** 2-3 month season, 1-2 practices a week

**Location:** Robert Gray, Kessler, CVG, Northlake Elementary Schools and Highlands Community Center

**Ages:** K-5<sup>th</sup>

**Preference:** Education/Teaching experience, enjoy working with children.

**National & Washington State Criminal Background Check Required**



## Volunteer Application

The Longview Parks & Recreation department operates a volunteer program that provides services to our community. The purpose of the program is to showcase the extraordinary knowledge, talent, and skills possessed by volunteers within our community.

The volunteer application is designed to give applicants an opportunity to share their background, experience, interests and skills, enabling the department to make the best possible volunteer placement.

### Volunteer Information

Today's Date: \_\_\_\_\_ Date available: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you over the age of 18:    *Yes*    *No*    *If a minor, please provide birthdate:* \_\_\_\_\_

Do you have a valid Washington State Driver's License?    *Yes*    *No*

*If yes, WA state Driver's License or ID Card #:* \_\_\_\_\_

Are you currently certified in:

CPR                    *Yes*                    *No*

First Aid              *Yes*                    *No*

Have you been convicted of a felony or released from prison within the last ten (10) years, or have you been convicted of a misdemeanor other than minor traffic offenses within the past three (3) years?

*Yes*                    *No*                    *If yes, please explain:* \_\_\_\_\_

### Availability

Availability:    *Long-term (6 months +)*                    *Short-term (under 6 months)*    *Special Project*

Anticipated Start Date: \_\_\_\_\_

Days you are available:    *Sunday / Monday / Tuesday / Wednesday / Thursday / Friday / Saturday*

Times you are available: \_\_\_\_\_

**Areas of Volunteer Work**

What particular areas of volunteer work are you interested in?  
(Day camps, special events, therapeutic, after school program, Special Olympics, office operations)

---

---

What general skills, experience, or education would you like to share during your time volunteering?

---

---

**References**

Please provide three (3) professional references:

---

---

---

**Waiver & Signature**

To the best of my knowledge, the information herein is true and complete. I understand that falsification of this application is grounds for dismissal as a volunteer. Further I give permission for an authorized representative of the City of Longview to conduct a state patrol criminal background check in accordance with RCW 43.43.830-839 and to inquire of individuals about my ability to perform all aspects of the volunteer position for which I am being considered and I release the City of Longview and those individuals/institutions that provide information from any liability that may arise from the provision of this information.

As a volunteer for the City of Longview, I am fully aware that the work associated with being a City Volunteer involves certain risks of physical injury or death. Being fully informed as to these risks and in consideration of my being allowed to participate in the City's Volunteer Program, I hereby assume all risk of injury, damage and harm to myself arising from such activities or use of City facilities. I also hereby individually and on behalf of my heirs, executors and assignees, release and hold harmless the City of Longview, its officials, employees and agents and waive any right of recovery that I might have to bring a claim or a lawsuit against them for any personal injury, death or other consequences occurring to me arising out of my volunteer activities.

I give permission to have my photo taken and used for publicity purposes by the City of Longview. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program.

Signature: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian if under 18

\_\_\_\_\_  
Date:

**Return Completed Document to:**

2920 Douglas Street, Longview, WA 98632

F: 360.442.5955

[rec@ci.longview.wa.us](mailto:rec@ci.longview.wa.us)

Questions or for more information: 360.442.5400