



CITY of REEDSPORT

451 Winchester Avenue
Reedsport, OR 97467-1597
Phone (541) 271-3603
Fax (541) 271-2809

Dial a Ride Volunteer Driver Application/Registration Form
Submit to: City of Reedsport Police Department

Full Legal Name: Last First MI

Address: Street City State Zip Code

Telephone: Home Work Cell

Email Address

Driver's License # Renewal Date

Have you ever had a traffic violation? () yes () No

Have you ever been convicted of a crime? () yes () No

If yes, please explain: _____
(Conviction will not necessarily disqualify an applicant from volunteering)

Are you currently volunteering elsewhere? If so where?

If you have a disability and require accommodations to perform your volunteer assignment, please indicate the needed accommodations: _____

Person to contact in case of emergency: Name Phone number

Brief Biographical sketch (education, employment, etc.):

I understand as City of Reedsport volunteer I serve at the pleasure of the Volunteer Coordinator. I may terminate the volunteer relationship at any time for any reason. Likewise, the Coordinator may terminate the volunteer relationship at any time for any reason. I hereby authorize the City of Reedsport to contact any source to verify and obtain information in assessing my qualifications including but not limited to past/present employment, motor vehicle agencies, and law enforcement agencies and hereby release all persons, whomsoever, from any legal liability for furnishing said information. I understand that refusing to consent to a criminal history check; my application will receive no further consideration. I certify that there are no misrepresentations or falsifications on this application and I am aware that any misstatements may cause disqualification of my application.

Code of Ethics

As a volunteer, I realize that I am subject to a code of ethics similar to that which binds the professionals in the field in which I work. Like them, I assume certain responsibilities and am expected to uphold the following.

1. I will keep confidential matters confidential.
2. I interpret "Volunteer" to mean that I have agreed to work for "no charge".

Having been accepted as a worker, I am expected to work according to standards as any other professional.

1. I promise to take to my work site an attitude of open-mindedness and a willingness to be trained.
2. I believe that I have an obligation to my work station, to those who direct it, to my colleagues and to those for whom we serve to maintain a professional attitude.

Confidentiality

Confidentiality is the preservation of information disclosed in a professional relationship. The nature of your duties as a Volunteer may bring you into contact with a number of community members on a very personal basis. You may become aware of information relating to their financial resources, medical background or family problems. All information on community members, including who they are and any information about their status and particular problems, is absolutely confidential. Breach of confidentiality will lead to immediate dismissal as a volunteer with the City of Reedsport.

My signature below certifies that I have read the material above. I understand the information provided and agree to abide by the Code of Ethics and Confidentiality describe described in this document.

Waiver:

I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages or injuries I may incur while volunteering for the City of Reedsport, its employees, officers or agents.

Signature of Volunteer

Date