



**CAREER LADDER/
VOLUNTEER APPLICATION**
UMATILLA-MORROW HEAD START, INC.
110 NE 4TH ST.
HERMISTON, OR 97838

PHONE: (541) 564-6878

FAX: (541) 564-6879

(Answer All Questions - Please Type or Print Clearly)

PERSONAL INFORMATION:

NAME: _____ PHONE (Home) _____ (Message) _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ EMAIL ADDRESS: _____

AREA OF INTEREST:

<input type="checkbox"/>	Cook	<input type="checkbox"/>	Bus Monitor	<input type="checkbox"/>	Clerical
<input type="checkbox"/>	Library Assistant	<input type="checkbox"/>	Teacher Assistant	<input type="checkbox"/>	Maintenance Specialist
<input type="checkbox"/>	CCR&R Training Coordinator	<input type="checkbox"/>	CCR&R Provider and Parent Consultant	<input type="checkbox"/>	WIC Clerk

I am a _____ Community Member _____ Parent

NAMES OF CHILDREN IN HEAD START: _____

EDUCATIONAL TRAINING:

NAME AND LOCATION	YEARS OF ATTENDANCE	DIPLOMA, CERTIFICATE OR DEGREE RECEIVED
Elementary School:		
High School:		
College or University:		

HOURS AND DAYS AVAILABLE:

Hours Available	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
Morning							
Afternoon							
Evening							

EMPLOYMENT HISTORY: Briefly describe your current and/or past work experience (duties and responsibilities), start with most recent position.

INTERESTS, HOBBIES, SKILLS

List other experiences or foreign languages.

PROCEDURE: To volunteer in the Umatilla-Morrow Head Start, Inc. programs:

- A. Complete the Program Application
- B. Submit to a criminal record check
- C. Complete an onsite interview
- D. Show documentation of a TB screen before volunteering

EQUAL OPPORTUNITY	DRUG-FREE WORKPLACE	AMERICANS WITH DISABILITIES ACT
UMCHS, an equal opportunity employer, complies with provisions of all Federal and State statutes relating to nondiscrimination, such as Fair Practices Act, section 504 of the rehabilitation Act, and Title IX Regulations.	UMCHS is committed to maintaining a drug-free workplace and strictly complies with the Drug-Free Workplace Act of 1988.	UMCHS complies with provisions of the Americans with disabilities Act of 1990. Reasonable accommodations for the application and interview process will be provided upon request and as required. Disabled persons may contact the Personnel office for additional information or assistance.

I authorize Umatilla-Morrow Head Start, Inc (UMCHS) to seek all information relative to my Application for Career Ladders and candidacy. I further authorize past employers or anyone with information about my history, education and qualifications to provide such information to UMCHS in response to their inquiry. I agree to hold harmless from any liability (suit, claim or other action) anyone supplying such information. The statements made by me in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or material omission on this application will be considered sufficient cause to disqualify me for volunteer opportunities with UMCHS.

Applicant Signature: _____

Date: _____