Print Form Submit by Email

Polk County Clerk of Courts Volunteer Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Availability

Which day(s) and during which hours are you available for volunteer assignments?

Monday	From	To
Tuesday	From	To
Wednesday	From	To
Thursday	From	To
Friday	From	To

Interests

Tell us in which areas you are interested in volunteering

- ☐ Administration
- ☐ Customer Service - Greeting
- ☐ Customer Service - Phones
- ☐ Filing
- ☐ Mail Distribution
- ☐ Other Office Duties

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Have you ever been convicted of a MISDEMEANOR or FELONY other than minor traffic violations and/or placed on probation, fined or given a suspended sentence in court? Include any convictions by military trial and any criminal charges for which you are awaiting trial. List all cases other than minor traffic violations. (Driving under the influence, reckless or hit-and-run are not minor traffic violations.) All service will be subject to satisfactory review of any criminal convictions. PLEASE NOTE: A full disclosure by you is to your advantage, as your record does not constitute an automatic bar to service. Factors such as, but not limited to, age at time of offense(s) and date of offense(s) as well as the relationship between the offense(s) and the job(s) for which you apply will be taken into account. HOWEVER, FAILURE TOADMIT CONVICTIONS WILL RESULT IN DISQUALIFICATION.

☐ **No**

☐ **Yes**

Agreement and Signature

I certify that the information contained in this application is correct and complete to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or for dismissal from service. I hereby authorize investigation of all statements I have made herein. I authorize the companies or persons named herein to give any information regarding my past employment, together with any information that they have regarding me, whether or not it is on their records. I hereby release said companies or persons, and Polk County Clerk of Courts from all liability for any damages whatsoever for issuing or obtaining this information. I understand that if I am selected for service I may be required to undergo a physical examination including urinalysis. In the event I am selected for service by Polk County Clerk of Courts, I agree to comply with all its policies, rules and regulations.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us. Please do one of the following: fax your application to (863) 534-4419 Attn. Becky, email it to beckymoses@polk-county.net, or mail it to Clerk of Courts, PO Box 9000 Drawer CC-24, Bartow, Fl. 33830.

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