

# U. C. Berkeley Early Childhood Education Program

## Application for Volunteer Service

Thank you for your interest in volunteering for our program. Please complete the application and attach proof of the following required vaccinations. You can bring your completed documents to 2339 Haste Street in Berkeley or attach via email to [ecep@berkeley.edu](mailto:ecep@berkeley.edu). If you have questions, contact our Administrative Assistant at 510-642-1827 or [ecep@berkeley.edu](mailto:ecep@berkeley.edu). Please be aware, that you can volunteer for a maximum of 16 hours/week.

Please attach proof of the following:

1. TB clearance within the past 12 months
2. Influenza vaccination (within the last 12 months) or signed statement saying that you decline to be vaccinated.
3. Measles, Mumps, Rubella (MMR) Immunization
4. Pertussis or Whooping Cough Immunization

❖Name: \_\_\_\_\_ ❖DOB: \_\_\_\_\_  
First Last

❖Email: \_\_\_\_\_ ❖Local phone: \_\_\_\_\_

❖Local Address: \_\_\_\_\_ ❖City/Zip: \_\_\_\_\_

❖Permanent Address (if different): \_\_\_\_\_ ❖City/Zip: \_\_\_\_\_

❖Name of person to be contacted in case of emergency: \_\_\_\_\_

❖Relationship: \_\_\_\_\_ ❖Phone: \_\_\_\_\_

❖Have you ever been convicted of an offense other than a traffic violation? \_\_\_\_\_

❖If yes, please describe: \_\_\_\_\_

❖Name of school presently attending: \_\_\_\_\_ ❖Major: \_\_\_\_\_

❖Name of present employer: \_\_\_\_\_ ❖Position: \_\_\_\_\_

❖Past volunteer or work experience with young children:

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❖Special skills or interests that you would like to share with us:

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❖Work Experience (current or past, if applicable):

<u>Name of Employer</u>	<u>Address</u>	<u>Position</u>
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2.		
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3.		
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❖List two references (one professional and one personal):

1.	
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❖What hours and days are you willing to volunteer? (Minimum is 2 hours at a time, and at least 4 hours per week.)

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❖What do you hope to gain from your volunteer experience with us?

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❖ I certify that I am in good health and that all information provided is true. By signing this document I understand that ECEP will perform a search for my name in the Megan's Law Database. The Megan's Law Database website provides information on registered sex offenders pursuant to California [Penal Code § 290.46](#) so that members of the public can better protect themselves and their families. ❖

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