CITY OF SAN RAMON

Application for City Hall Tour Docent

Please print or type the information.

Name: _____

Address: _____ _____

Telephone: Home: _____ Business: _____ Cell: _____

Email: _____

Emergency Contact Name and Phone: _____

_____

How long have you lived in San Ramon? _____

Circle the best volunteer days for you: Mon Tues Wed Thurs Fri

(all tours are from 9:30 am to 11:00 am)

How many days per week would you like to participate? 1 2 3

Willing to submit to a background check including fingerprinting: YES ☒ NO

(provided at no cost)

What would make you a good docent for third graders learning about local government?

Describe any experience you have working with elementary school children?

Are you currently involved in any community or volunteer organizations? If so, please list.

Please feel free to share any other comments that you think are important.

Signature: _____ Dated: _____

RETURN APPLICATION TO:

CITY CLERK - CITY OF SAN RAMON - 7000 BOLLINGER CANYON RD - SAN RAMON, CA 94583

PHONE: (925) 973-2539 FAX: (925) 275-0650 EMAIL: CITYCLERK@SANRAMON.CA.GOV