PYRAMID LAKE PAIUTE TRIBE VOLUNTEER / ACTION / COMMUNITY SERVICE WORK <u>APPLICATION</u>

Name:	Date:
Address:	
Social Security #:	Date of Birth:
	Cell #:
VOLUNTE	CER INFORMATION
Department:	Position:
Supervisor:	Title:
Hours:	
☐ Part-time (# of hours a week):	
Type of volunteer:	
☐ Event ☐ G.A. ☐ Coach ☐ Cultu	ural 🗌 Intern 🗌 Student 🔲 Other
Court ordered:	
Court Information:	
	Contact: #
	TIFICATION
	d is true and correct to the best of my knowledge. I leading information, my status as a Volunteer will be ne Pyramid Lake Paiute Tribe.
Signature of Volunteer:	Date:
FOR OF	FICE USE ONLY
DEPT. VERIFIED: YES NO	SUPERVISOR APPROVED?
POSITION W/CHILDREN? YES NO	BACKGROUND REQUIRED? YES NO
START DATE:	EAN REQUIRED: YES NO
END DATE:	WORKER'S COMP COVERAGE: YES NO
Signature of Supervisor:	Date:
Signature of HR Staff:	Date: