



UTAH COUNTY VOLUNTEER APPLICATION FORM

Please Print All Information on this Form

Application date: _____ Department: _____

Referring Employee: _____

Name of Employee supervising volunteer: _____

Name: _____ SSN: X X X - X X - ____ _

Email: _____ Phone: _____

Address: _____

Brief explanation of duties: _____

Anticipated length of service: _____

**A volunteer is anyone who requests and is authorized to provide service
to the County without receiving County compensation.**

*Please forward this original form to the Personnel Department within one week
of application*