



**PLACEMENT INFORMATION**

Past/Present Volunteer Experience

Skills/Hobbies

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

Any special needs? (i.e. allergy, disability, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT: READ BEFORE SIGNING**

The City of Eden Prairie’s policy is to provide equal opportunities to all. The City of Eden Prairie does not discriminate against volunteers on the basis of race, color, creed, religion, national origin, gender, and marital status, status with regard to public assistance or disability in the admission or access to, or treatment of volunteering in its programs or activities.

The facts set forth in my application are true and complete. I understand that if I volunteer, false statements on this application shall be considered cause for dismissal. I authorize investigation of all statements and matters contained in this application which the City of Eden Prairie may deem relevant to my volunteer services and I authorize persons having information concerning my record or me to report such information to the City of Eden Prairie. I release each person from all claims or liabilities whatsoever on account of making such inquiry or making such disclosures.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_  
(if under 18 years)

Date \_\_\_\_\_

**Mail, Fax or E-mail to:**

*City of Eden Prairie  
Parks and Recreation  
8080 Mitchell Road  
Eden Prairie, MN 55344*

*Fax: 952-949-8480  
Parks@edenprairie.org*

*If you have any questions about any part of this application,  
please contact 952-949-8442 or [parks@edenprairie.org](mailto:parks@edenprairie.org).*