



Office of Human Resources
One College Boulevard
Paterson, New Jersey 07505-1179
Phone: 973-684-6108

Volunteer Application

Legal Last Name: _____

Legal First Name: _____

Home Address: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

Program Information:

Department Name: _____

Requested by: SUPERVISOR: _____

PRINT

SIGN

DATE

Program participating in (Ex: AmeriCorps, C-WEP etc.): _____

Start Date of Program: _____ End Date of Program: _____

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with Passaic County Community College (from hereon in "PCCC") that is true, correct, and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by PCCC. I understand that misrepresentations or omissions may cause my immediate rejection as an applicant for a volunteer position with PCCC or my termination as a volunteer.

*****The completion of a background check will be required for the selected candidate. *****

Signature _____ Date _____

Please email completed forms to: HR@pccc.edu