



OREGON STATE PARKS AND RECREATION DEPARTMENT

RENEWAL APPLICATION for RETURNING PARK HOSTS

(Use this form for up to two volunteer applicants with the same mailing address.
If at a different address, attach a separate application for each person.)

Rec'd _____

Ent'd _____

Initials _____

Conf. PC _____

Application for the _____ Calendar Year # of People Occupying Host Site _____

1st Host's Last Name: _____ First Name: _____ Middle Initial: _____

2nd Host's Last Name: _____ First Name: _____ Middle Initial: _____

Full Name(s) of other people staying with you at host site: (Please check box after name if these people are NOT planning to host)

_____ _____

Will you have a pet with you? Yes No (Current rabies vaccination certificates are required; be sure to bring with you)

PART 1: Contact Info: Please provide updates for ANY changes from previous year's application.

Primary Mailing Address:

Alternate Address:

Street:	Street:
City, ST, Zip:	City, ST, Zip:
Primary Phone #: circle: (land line, cell, msg, work)	Primary Phone #: circle: (land line, cell, msg, work)
2nd/Alternate Phone #: circle: (land line, cell, msg, work)	2nd/Alternate Phone #: circle: (land line, cell, msg, work)
Is this mail forwarding address only? <input type="checkbox"/> Yes <input type="checkbox"/> No	At what times of the year can mail reach you here?
If no, at what time(s) of the year can mail reach you here?	What's the best way to contact you? circle: (primary ph., alternate ph., e-mail)
Primary E-Mail Address:	Secondary E-Mail Address:

PART 2: Licenses/Certificates/Training: (Include year of last training and expiration date, if applicable)

Please check the boxes below to indicate OPRD or other training completed.

1st Applicant Complete This Box

Are you retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	Previous Occupation(s):
Current Occupation:	
<input type="checkbox"/> Teaching _____ (which subjects/grades?)	<input type="checkbox"/> Q Customer Service Training _____
<input type="checkbox"/> Interpretive _____	<input type="checkbox"/> Verbal Judo Training _____
	<input type="checkbox"/> First Aid/CPR _____
	<input type="checkbox"/> Other _____
Driver's License State of Issue:	Exp. Date:

2nd Applicant Complete This Box

Are you retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	Previous Occupation(s):
Current Occupation:	
<input type="checkbox"/> Teaching _____ (which subjects/grades?)	<input type="checkbox"/> Q Customer Service Training _____
<input type="checkbox"/> Interpretive _____	<input type="checkbox"/> Verbal Judo Training _____
	<input type="checkbox"/> First Aid/CPR _____
	<input type="checkbox"/> Other _____
Driver's License State of Issue:	Exp. Date:

PART 3: Park Host Type

Please refer to the *Park Host Definitions & Duties* sheet for a listing of general duties for different types of park hosting positions before answering this next section. Then check all boxes that apply.

I/We are interested in the following types of hosting assignments:

- Campground Host
- Maintenance Host
- Visitor Services Host
- Interpretive Host (**Complete Supplement B – OPRD Interpretive Host Questionnaire**)
- Extended Stay/Special Project Host (*more than 3 months*)
- Emergency Fill-in (*last minute or less than 1 month*)
- I/We **would/would not** (circle one) be willing to perform yurt or cabin cleaning duties
- I/We would like to be placed on a waiting list until the parks I desire have openings
- I/We would like to be placed on a waiting list for **any park**
- Please Call! I am/We are willing to consider other assignments as needed

PART 4: My/Our Park Preferences, Dates of Availability & Park Assignments

Use the chart below to indicate the park locations where you'd like to work and the months you are available. If you can be flexible, please write *any park* or *open*. Your chances of landing an assignment are very good if you do this, but be clear about what you will accept. If you are already assigned to any parks during the year, be sure to check that you are not available, and list the parks by month in the middle column where you have confirmed host assignments.

Month/ Year	Available or Not Available <i>(check one only)</i>		Already Assigned (list park)	Park Choices
January 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
February 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
March 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
April 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
May 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
June 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
July 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
August 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
Sept. 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
October 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
November 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
December 20_____	<input type="checkbox"/>	<input type="checkbox"/>		1) 2)
OTHER Parks or Areas you will consider	<i>List up to 8 in boxes to the right</i>	→ → →	1) _____ 2) _____ 3) _____ 4) _____	5) _____ 6) _____ 7) _____ 8) _____

PART 5: Questions. Please answer the following questions to help us determine the best placement for you.

Do you have any medical/physical conditions or limitations to be taken into consideration when assigning tasks?

*NOTE: All hosts do need to be physically able to perform the duties of the jobs they accept. Depending on your specific hosting assignment, we may be able to modify the work to accommodate your needs.

Applicant # 1: Yes No Please explain.

Applicant # 2: Yes No Please explain.

What interests you most about continuing to be a park host with Oregon Parks and Recreation Department?

What host duties do you most enjoy? _____

Is there anything else you'd like us to know about you? _____

PART 6: Your Recreational Vehicle/ Camping Equipment

Most parks have host sites that can accommodate most size/length RV. However, parks reserve the right to place you in a different site than planned.

Make/Year of RV: _____ Motorhome 5th Wheel Trailer Tent Other: _____

Length of Entire Unit: (RV and/or Truck/Trailer) _____ Is there an Extra or Tow Vehicle? Yes No Length: _____

Slide-Outs? Yes No Amps Needed: _____ Will you accept a site without full hook-ups? Yes No

Do you have a Satellite Dish? Yes No If yes, is it mounted on your RV or a separate portable one? _____

By Oregon law and as a safety precaution for visitors, staff, and other hosts, all hosts are subject to a criminal background check each year before assigned duties can begin. Upon scheduling, we will request that you complete a separate criminal history/DMV check form. Please read the statement below, fill in your name(s), then sign and date the application.

I/We, _____ AND _____, hereby certify that the information provided on this application is true and correct to the best of my knowledge and belief. I hereby grant the State of Oregon, Oregon Parks and Recreation Department (OPRD), permission to verify facts contained here within. I hereby authorize the release of any relevant information pertaining to reference checks, criminal history, driving records, education, work and volunteer history to verify my eligibility to volunteer at any site operated by OPRD. I agree to abide by OPRD's Volunteer Code of Conduct as provided on website or by my park(s).

1st Applicant's Signature: _____ **Today's Date:** _____

2nd Applicant's Signature: _____ **Today's Date:** _____



SUPPLEMENT A: - RETURNING Park Host Checklist of Supplies -

All Applicants! Please complete the following checklist to give us an update on your supplies.

Today's Date: _____

Applicant #1: _____
(Applicant #1 name here)

(Circle one in each of the following statements:)

I **DO/DO NOT** have an OPRD volunteer host uniform (vest, hat or visor) Vest Size: S M L XL 2X 3X 4X 5X

I **DO/DO NOT** have a host name tag. If not, provide name as you'd like it to appear on the tag: _____

I **DO/DO NOT** have a Host Insurance ID Card. Issued on (date): _____

I **DO/DO NOT** have an iLearn account for completing safety training.

I **DO/DO NOT** have a Park Host shield pin with:
(Circle last hourly bar received if applicable) 1,000 2,000 4,000 6,000 8,000 10,000 HOURS
12,000 14,000 16,000 18,000 20,000 >20,000 HOURS!

Applicant #2: _____
(Applicant #2 name here)

(Circle one in each of the following statements:)

I **DO/DO NOT** have an OPRD volunteer host uniform (vest, hat or visor) Vest Size: S M L XL 2X 3X 4X 5X

I **DO/DO NOT** have a host name tag. If not, provide name as you'd like it to appear on the tag: _____

I **DO/DO NOT** have a Host Insurance ID Card. Issued on (date): _____

I **DO/DO NOT** have an iLearn account for completing safety training.

I **DO/DO NOT** have a Park Host shield pin with:
(Circle last hourly bar received if applicable) 1,000 2,000 4,000 6,000 8,000 10,000 HOURS
12,000 14,000 16,000 18,000 20,000 >20,000 HOURS!

I/We **DO/DO NOT** have a personalized Park Host sign for my RV site.

Name(s) as you'd like it to appear on sign. _____

Feel free to use the space below to further explain anything in questions above.

PLEASE SEND APPLICATION MATERIALS TO:

Volunteer/Host Coordinator
Oregon Parks & Recreation Dept.
725 Summer St NE, Suite C
Salem, OR 97301-1271

OPRD Salem Headquarters: 503-986-0707
Recreation Programs Fax: 503-986-0792
Toll-Free Host Information Line: 800-551-6949
Toll-Free Volunteer Hotline/Msg Line: 877-225-9803
OPRD Website: www.oregon.gov/OPRD/PARKS/
Volunteer Page: www.oregon.gov/OPRD/PARKS/VOL