

DEPARTMENT OF FISH AND **WILDLIFE**
NATURAL RESOURCE VOLUNTEER PROGRAM
CONFIDENTIAL PERSONAL HISTORY STATEMENT

PERSONAL

The following information is requested of you for verification and contact purposes.

1. Please type or print your legal name

Last _____ First _____ Middle _____

2. Address Residence:

(number) (street) (city) (State) (ZIP)

Mailing (if different from residence):

(number) (street) (city) (State) (ZIP)

3. Please list your residence phone and an alternate number for messages

Residence # (_____) _____ Other # (_____) _____

4. E-mail address (if you have one): _____

5. Birth date: Mo: _____ Day: _____ Year: _____

6. Social Security Number: _____ - _____ - _____

7. Are you a United States Citizen? ____ Do you speak another language other than English? ____

8. Prior Military Service?

Yes ____ No ____ If yes, which branch? _____ How many years? _____

EDUCATION

9. Please indicate below all the schools you have attended beginning with high school. During the background investigation, persons who have known you in a learning environment may be contacted.

Name of School	Location of School	Dates Attended	Major	Degree Earned
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

REFERENCES, ACQUAINTANCES

10. In the space below please list as references three individuals such as co-workers and supervisors who have knowledge of you and your character. Exclude relatives. Past co-workers and supervisors are acceptable.

Name	Address where person can be contacted	Telephone Number	
		Work	Home

11. In the space below, please list as references three other individuals who have knowledge of you and your character. Exclude relatives. Example neighbors, family friends, roommates, teachers, classmates, etc.

Name	Address where person can be contacted	Telephone Number	
		Work	Home

EXPERIENCE AND EMPLOYMENT

12. Beginning with your most current employment, please list all jobs (part-time, temporary, and voluntary positions) you have held in the last seven years.

Name of Employer: _____

Contact Person: _____ Telephone No.: _____

Address: _____

Dates of Employment: _____ to _____ Years employed: _____

Job Title: _____ Full Time _____ Part Time _____ Volunteer _____

Reason for leaving: _____

Name of Employer: _____

Contact Person: _____ Telephone No.: _____

Address: _____

Dates of Employment: _____ to _____ Years employed: _____

Job Title: _____ Full Time _____ Part Time _____ Volunteer _____

Reason for leaving: _____

Name of Employer: _____

Contact Person: _____ Telephone No.: _____

Address: _____

Dates of Employment: _____ to _____ Years employed: _____

Job Title: _____ Full Time _____ Part Time _____ Volunteer _____

Reason for leaving: _____

MOTOR VEHICLE OPERATION

An investigation of your driving history will be made through a records check. To expedite this procedure, please supply the following information.

13. California Driver's License Number _____
Expiration Date _____ Class (Type of License) _____
Name under which license was granted _____
Other names used? _____
Please list other states where you have been licensed to operate a motor vehicle.
State _____ License # _____ State _____ License # _____

14. Have you ever been refused a driver's license by any state? ____Yes ____No

15. Have you ever applied for or obtained a driver's license under a fictitious name? ____Yes ____No

16. Have you ever been refused insurance for any reason other than failure to pay a premium? ____Yes
____No

17. If the answer to any question from #13 through #15 is yes, please explain:

18. Will you supply us with proof of auto insurance, including policy number, insurance company name and expiration date? Yes ____ No ____

19. Please list all traffic citations (excluding parking violations) you have received in the last 5 years.

Nature of Violation	Location (City of State)	Approximate Date	Action Taken
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20. Do you have special skills or qualifications which you feel would especially qualify you for volunteer work with the California Department of Fish and Wildlife Natural Resource Volunteer Program?

21. Do you currently or have you ever owned a motor vessel? _____

CALIFORNIA DEPARTMENT OF FISH AND **WILDLIFE**
AUTHORIZATION TO RELEASE INFORMATION

I, _____, hereby authorize the State of California to request information and copies of the following items for employment purposes:

- Documents contained in my Official Personnel File
- My attendance reports for the past three (3) years
- Any Personnel Action Requests
- My last four (4) Performance Reviews
- Any information of a negative nature or adverse action
- Any other personnel related information that may assist in evaluating your qualifications

I also authorize the State of California to contact my former supervisors and other appropriate references to obtain information regarding my past job performance. A photocopy of this release shall be considered the same as an original. This authorization expires 12 months from the date indicated below.

Signature

Social Security Number

Date

INCOMPATIBLE ACTIVITIES

The following activities, employment, or enterprise by employees of the California Department of Fish and Wildlife are determined to be inconsistent, incompatible, and in conflict with their duties as a State employee (provisions outlining the circumstances under which something is considered an incompatible activity are listed on the Department Operations Manual under Section 12770 through Section 12775). No attempt is made here to list all of the restrictions on these activities, or to list all of the provisions of the law and administrative rules that must be observed.

1. Use of State time, property, or position for anything other than State business.
2. Outside employment, activity, or enterprise (including teaching, lecturing, or writing), with or without compensation, which directly or indirectly affects the State.
3. Accepting personal gifts and financial interests.
4. Improper use of confidential information.
5. Political activity of employees is controlled by the Hatch Act and/or other federal, state, or local laws. Employees contemplating political activity should determine whether or not the planned activity would violate federal, state, or local laws.

Signature

Date

CALIFORNIA DEPARTMENT OF FISH AND **WILDLIFE**
NATURAL RESOURCE VOLUNTEER PROGRAM QUESTIONNAIRE

1. Are there any reasons that you know of that would prohibit you from spending a minimum of 24 hours per month as a non-paid volunteer?
2. Would there be a concern for your safety?
3. Are there any other obligations that might interfere with your ability to serve as a volunteer?
4. Are you currently working? If so, how much?
5. Are you now, or have you previously been active with another volunteer organization? Was it with another law enforcement agency?
6. Are you teachable? Are you accountable? Are you available?
7. Are you willing and able to take orders, instruction and direction?
8. How do you feel about working in the office versus working in the field?
9. Do you object to one or the other, or strongly prefer one or the other?
10. Will you be able to attend a monthly staff meeting?
11. Will 24 hours per month be your maximum, or are you looking for more volunteer hours?
12. Would you be interested in a volunteer teaching position?
13. Will you be able to attend a two week training academy?
14. Are you familiar with computers and comfortable using them?

15. Have you ever been contacted by a Department employee?

16. Do you hunt or fish? If so, how often?

17. Do you have experience with any of the following?

- A. Restricted species
- B. Environmental Impact Reports
- C. Pollution Response
- D. Inspections
- E. Court or Legal proceedings
- F. Accounting/Book Keeping
- G. Animal Care
- H. Public Relations/Public Information Officer
- I. Boat Handling
- J. Mechanic
- K. General Repairs
- L. Fund Raising
- M. Teaching/Instruction
- N. Newsletter preparation
- O. Construction/Plumbing/Electrician
- P. First Aid/CPR
- Q. Photography/Video