



Application for Volunteer Program

Thank you for your interest in volunteering with the Visitor Information program. Volunteer positions are available at our Information Centers and Roving Ambassador Station. We are also looking for volunteers who are willing to work on special projects in the Aviation Marketing offices. Volunteers must work a minimum of 8 hours a month. Available shift times are 8-Noon, Noon to 4 p.m., 4 -8 p.m. and 8 p.m. – Midnight.

Please return your completed application to Lakita Logan, Visitor Information Program Coordinator, 9532 Earhart Road, Suite 205, Oakland, CA 94621 or to volunteer@oaklandairport.com. Please note completion of an application does not guarantee acceptance into the volunteer program.

Please Print

Name _____ Date _____

Birthday (Mo./day/year) _____ Social Security # _____

Phone _____ Cell Phone _____

Email _____

Address _____ City/State/Zip _____

Have you ever volunteered at Oakland International Airport? Yes No

Volunteer Questionnaire

How long have you lived in the Bay Area?

On a scale of 1(lowest) to 10 (highest), how well do you know bay area attractions, restaurants, accommodations, etc.? Please Circle 1 2 3 4 5 6 7 8 9 10

How did you learn about volunteering for Oakland International Airport? _____

Please list the reasons you are interested in volunteering in OAK volunteer program? _____

Do you speak and foreign languages? Yes No If yes, please list. _____
Are you an interpreter of American Sign Language Yes No



Customer Service Experience

Please describe any customer experience you have_____

Information Centers & Rover Ambassador Station

Circle available days(s) and frequency, and check the shift periods(s) preferred:

Sun Mon Tue Wed Thu Fri Sat

How often: Monthly Semi-monthly Weekly Other:_____

Mornings Afternoons Evenings Late Shift (8-Midnight) Weekends only

Special Projects & Program Administration Assistance

Circle available days(s) and frequency, and check the shift periods(s) preferred:

Mon Tue Wed Thu Fri Mornings Afternoons

How often: Monthly Semi-monthly Weekly Other:_____

Volunteer/ Personal References

1. Name_____Phone_____

Organization _____

2. Name_____Phone_____

Organization _____

In case of an emergency

Contact_____Relationship_____

Home Phone_____Cell_____