MST Navigators Volunteer Program
Application

Are you comfortable with representing MST and being an important community resource? As a Navigator, you will interact with MST customers. Your Navigator assignments will require you to be approachable, observant, and a good listener.

Being a Navigator requires a positive attitude and professionalism! If you have these important traits, customers will trust you with their transportation questions and that you will take their concerns seriously.

As a Navigator, you are entrusted with MST's resources, facilities, and customers. This is a huge responsibility! Great Navigators realize everything they do is a direct representation of MST and will be professional in all situations.

Thank you for your interest in the Navigator Volunteer Program. We look forward to learning more about you!

QUALIFICATIONS & REQUIREMENTS:

- The Navigator Volunteer Program is open to Monterey County residents ages 16 and older.
- Experience or willingness to learn about the MST bus system.
- Available between the hours of 7:00 am - 5:00 p.m. (Weekend Hours May Apply)

VOLUNTEERS 18 YEARS OR OLDER MUST:

- Pass a criminal background check.
- Commit to volunteer a minimum of 10 hours per month, but not to exceed 35 hours.
- Participate in monthly check-in meetings.
- Participate in the 6-month update meetings.
- Meet training requirements.

MST Navigators Volunteer Program Application

INCENTIVE FOR VOLUNTEERS 18 YEARS OR OLDER

- Receive a complementary MST monthly bus pass

INCENTIVE FOR VOLUNTEERS 16-17 YEARS OLD

- Receive Community Services Hours

NEXT STEPS

Submit your completed application. Please print legibly and fill out each section completely. You will be contacted by a Mobility Specialist once your application is reviewed. Applying is not a guarantee that you will be accepted into the program. For questions, please call 831- 264-9803. Fax, e-mail, or mail your completed application to:

MST Mobility Department

201 Pearl St, Monterey, CA 93940

mobility@mst.org

Fax: 831-296-8826

MST Navigators Volunteer Program Application

CONTACT INFORMATION

Name: _____

Current Address: _____

City: _____ State:_____ Zip Code:_____

Mailing Address (If different): _____

City: _____ State:_____ Zip Code:_____

Telephone: (_____) _____Cell Phone: (_____)_____

Email: _____

Do you have any relatives currently employed or volunteering at MST?   _____Yes _____No

If yes, who and how are you related? _____

VOLUNTEERING AVAILABILITY

What date are you available to start volunteering? _____/_____/_____

Please write an 'X' to show your availability during the hours of 7:00 am - 5:00 pm:

Monday	_____AM _____ PM	Friday	_____AM _____ PM
Tuesday	_____AM _____ PM	Saturday	_____AM _____ PM
Wednesday	_____AM _____ PM	Sunday	_____AM _____ PM
Thursday	_____AM _____ PM		

EXPERIENCE

Please list your previous volunteer experience. Begin with your most recent experience.

Volunteered for:

_____

Duties Assigned:

_____

_____

_____

MST Navigators Volunteer Program Application

Volunteered for:

_____

Duties Assigned:

_____

_____

_____

SKILLS

Please list any relevant education, language skills, or trainings you have receive:

_____

_____

_____

Please list any professional, social, or civic memberships to any groups, clubs or organizations:

_____

_____

_____

How did you hear about the MST Navigator Program?

_____

_____

_____

Why do you want to be an MST Navigator?

_____

_____

_____

MST Navigators Volunteer Program Application

Initial below to agree to the following.

_____ I hereby grant and convey unto MST all right, title, and interest in any and all photographic images and video or audio recordings made by MST or any third party during my volunteer activities, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

_____ I understand and accept I will be asked to complete a criminal background check if I am over the age of 18.

AGREEMENT

I certify this information provided is true and correct to the best of my knowledge. I understand that applying is not a guarantee that I will be accepted in the Navigator Program. I accept that if my application is received outside the open volunteer recruitment, my application will be held for a period of one year for future consideration, and I will be notified should a volunteer position become available.

_____

Applicant Signature   Date

Section to be completed if the applicant is under 18 years of age:

I hereby grant my son/daughter _____, my permission to apply

as an MST Navigator Youth Volunteer.

_____

Parent/Guadian Signature   Date

_____

Name of Parent/Parent Guardian   Contact Number