

**COUNTY OF KERN  
RETIRED EMPLOYEE VOLUNTEER REQUEST FORM**

Name: \_\_\_\_\_

Contact Information:

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Desired Department for Volunteer Work \_\_\_\_\_

Desired Volunteer Work/Position: \_\_\_\_\_

Desired Days and Hours of Work: \_\_\_\_\_

Last Position Held: \_\_\_\_\_

Last Department Worked For: \_\_\_\_\_

Current Licenses: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Questions? Contact Tracey Eldridge at 868-3163 or [teldridge@co.kern.ca.us](mailto:teldridge@co.kern.ca.us)

Please Mail Completed Form to:

Kern County Administrative Office  
Attn: Tracey Eldridge  
1115 Truxtun Avenue, 5<sup>th</sup> Floor  
Bakersfield, Ca 93301