

Volunteer Application for Natural Resources Agencies

Instructions:
Mark in the appropriate boxes, for other items either print or type responses. If extra space is needed use item 19.

1. Name (Last, First, Middle)	2. Age	3. Telephone Number () -	4. Email Address			
5. Street Address (include apartment no., if any)			6. City, State, and Zip Code			
<p>7. Which general volunteer work categories are you most interested in?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Archeology <input type="checkbox"/> Botany <input type="checkbox"/> Campground Host <input type="checkbox"/> Construction Maintenance <input type="checkbox"/> Computers <input type="checkbox"/> Conservation <input type="checkbox"/> Education <input type="checkbox"/> Fish/Wildlife </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Historical/ Preservation <input type="checkbox"/> Pest/Disease Control <input type="checkbox"/> Minerals/ Geology <input type="checkbox"/> Natural Resources Planning <input type="checkbox"/> Office/Clerical <input type="checkbox"/> Range/Livestock <input type="checkbox"/> Research/Librarian </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Soil/ Watershed <input type="checkbox"/> Timber/Fire Prevention <input type="checkbox"/> Trail/Campground Maintenance <input type="checkbox"/> Tour Guide/Interpretation <input type="checkbox"/> Visitor Information <input type="checkbox"/> Other (<i>please specify</i>) </td> </tr> </table>				<input type="checkbox"/> Archeology <input type="checkbox"/> Botany <input type="checkbox"/> Campground Host <input type="checkbox"/> Construction Maintenance <input type="checkbox"/> Computers <input type="checkbox"/> Conservation <input type="checkbox"/> Education <input type="checkbox"/> Fish/Wildlife	<input type="checkbox"/> Historical/ Preservation <input type="checkbox"/> Pest/Disease Control <input type="checkbox"/> Minerals/ Geology <input type="checkbox"/> Natural Resources Planning <input type="checkbox"/> Office/Clerical <input type="checkbox"/> Range/Livestock <input type="checkbox"/> Research/Librarian	<input type="checkbox"/> Soil/ Watershed <input type="checkbox"/> Timber/Fire Prevention <input type="checkbox"/> Trail/Campground Maintenance <input type="checkbox"/> Tour Guide/Interpretation <input type="checkbox"/> Visitor Information <input type="checkbox"/> Other (<i>please specify</i>)
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8. What qualifications/skills/experience/education do you have that you would like to use in your volunteer work?						

<input type="checkbox"/> Backpacking/Camping	<input type="checkbox"/> Heavy Equipment Operation	<input type="checkbox"/> Sign Language
<input type="checkbox"/> Biology	<input type="checkbox"/> Horses – Care/ Riding	<input type="checkbox"/> Supervision
<input type="checkbox"/> Boat Operation	<input type="checkbox"/> Landscaping/Reforestation	<input type="checkbox"/> Other Trade skills <i>(please specify)</i> .
<input type="checkbox"/> Carpentry	<input type="checkbox"/> Land Surveying	<input type="checkbox"/> Teaching
<input type="checkbox"/> Clerical/Office Machines	<input type="checkbox"/> Livestock/Ranching	<input type="checkbox"/> Working with People
<input type="checkbox"/> Computer Programming	<input type="checkbox"/> Map reading	<input type="checkbox"/> Writing/Editing
<input type="checkbox"/> Drafting/Graphics	<input type="checkbox"/> Mountaineering	<input type="checkbox"/> Other <i>(please specify)</i>
<input type="checkbox"/> Driver's License	<input type="checkbox"/> Photography	
<input type="checkbox"/> First Aid Certificate	<input type="checkbox"/> Public Speaking	
<input type="checkbox"/> Hand/Power Tools	<input type="checkbox"/> Research/Librarian	

9. Based on boxes checked in items 7 and 8, what particular type of volunteer work would you like to do? (Please describe any specific qualifications, skills, experience, or education that apply)

10. Are you a United States Citizen? Yes No (If no, additional information may be required)

11. a. Have you volunteered before? Yes No
 b. If Yes, please briefly describe your volunteer experience.

12. Would you like to supervise other volunteers? Yes No

13. What are some of your objectives for working as a volunteer? (Optional)

14. Please specify any physical limitations that may influence your volunteer work activities:

15. a. Which months would you be available for volunteer work?

- January February March April May June
 July August September October November December

15b. How many hours per week would you be available for volunteer work? Hours

15c. Which days per week would you be available for volunteer work?

- Monday Tuesday Wednesday Thursday Friday Saturday Sunday

16. Specify at least three states or specific locations within a state where you would like to do volunteer work.

17. Specify your lodging needs:

- I will furnish my own lodging (such as tent; camper; own, relative's, or friend's place)
 I will require assistance in finding lodging

18. If a volunteer assignment is not available at the location specified in item 16, do you want your application forwarded to another location or Federal agency seeking volunteers with your background/interests?

- Yes No (Please specify)

19. This is provided for more detailed responses. Please indicate the item numbers to which these responses apply:

Burden Statement

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Notice to Volunteer

Volunteers are not considered Federal employees for any purposes other than tort claims and injury compensation. Volunteer service is not creditable for leave accrual or any other benefit. However, volunteer service is creditable work experience. By signing this application the volunteer(s) understand(s) s/he may be subject to a reference check, background check, and/or criminal history inquiry.

Privacy Act Statement

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20. Signature (Sign in ink)

20. Date