



# Friends of Rogers Environmental Education Center Volunteer Application

## CONTACT INFORMATION

Name:		Date:	
Street Address:		Home Phone:	
City, State, Zip:		Cell Phone:	
Email:		Are you 18 or older:    Y    N	
Driver's License: Y   N	Access to a vehicle: Y   N	If under 18, date of birth:	

When is the best time to call? \_\_\_\_\_

Availability: This will assist us in making our volunteer schedule

- Long-term                       Short-term                       Special Project

1. Check the box for the time period (s) you are available.
2. Please note the hours available if it is only for a specific time period.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Are there any physical/medical conditions or restrictions that need to be taken into consideration when arranging volunteer assignments for you?    Y    N

If "yes", please explain

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## SKILLS AND INTERESTS

Tell us in which areas you are interested in volunteering:

- |  |  |
|--|--|
| <input type="checkbox"/> Artist par Excellence<br><input type="checkbox"/> Biological Inventory Taxonomist<br><input type="checkbox"/> Carpentry Curator<br><input type="checkbox"/> Exhibit Curator<br><input type="checkbox"/> Feeder Maintenance Supervisor<br><input type="checkbox"/> Interpretative Naturalist<br><input type="checkbox"/> Librarian | <input type="checkbox"/> Office Receptionist<br><input type="checkbox"/> Surveyor of Nest Boxes<br><input type="checkbox"/> Trail Administrator<br><input type="checkbox"/> Wildlife Horticulturalist<br><input type="checkbox"/> Worm Manager<br><input type="checkbox"/> Nature Writer<br><input type="checkbox"/> Other _____ |
|--|--|

Current/ Previous work or Occupation:	
Previous volunteer Experience:	What?
	Where?
Hobbies, Interests, & Skills:	
Special training, Certifications:	
Why do you want to volunteer at Rogers?	<hr/> <hr/> <hr/> <hr/> <hr/>

Other comments or ideas for volunteering? \_\_\_\_\_

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## EDUCATION

Please circle your highest level of education and list any degrees held

Grade School: 4 5 6 7 8	High School: 9 10 11 12
College Years: 1 2 3 4 5	Beyond:
Degree(s) in:	Degree(s) in:

Are you applying to meet community service obligations: **Y N**

Do you have any criminal convictions (other than parking violations)? **Y N**

If "Yes", please explain: \_\_\_\_\_

Service Advisor:

Hours Required:

Contact Information:

Start and end dates:

*I understand that Friends of Rogers will run my name and date of birth through State and Federal data bases*

### REFERENCES

Name:

Phone:

Street Address:

City/State/Zip:

Relationship:

Name:

Phone:

Street Address:

City/State/Zip:

Relationship:

Name:

Phone:

Street Address:

City/State/Zip:

Relationship:

## AGREEMENT AND SIGNATURE

*I understand that I am not an employee of the Rogers Environmental Education Center, and that any duties that I perform, without prior written agreement, are as a volunteer. I agree to abide by the procedures set forth by the Friends of Rogers for my assigned duties. I also understand that it is my responsibility to update and make changes to the information on this form.*

*I hereby release the Friends of Rogers, its officers, directors, staff, and volunteers from **any and all** liability in regard to **any** injury or illness that I may sustain as a result of my work with Rogers Environmental Education Center.*

*By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal and/or criminal prosecution.*

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Applicant Signature

Date

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Name (Please print)

***If the applicant is less than 18 years of age, a parent or guardian must also sign the statement below:***

*I have read the foregoing Volunteer Information, by signing below, hereby release the Friends of Rogers, its officers, directors, staff, and volunteers from **any and all** liability in regard to any injury or illness that the Applicant, a minor under my guardianship, may sustain as a result of his or her work with Rogers Environmental Education Center.*

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Parent or Guardian Signature

Date

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Name (Please print or type)

Relationship to Applicant

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Address (if different from that of Applicant)

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Day Phone (in case of emergencies)

Evening Phone

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

**Thank you for completing this application form and for your interest in volunteering with us!**