

3. AVAILABILITY

What dates will you be available? From: _____ To: _____

What days? Circle: SUN MON TUE WED THU FRI SAT

Hours: _____

How many days per season do you feel you can realistically commit to volunteering?

4. EDUCATION

Circle highest level of education completed:

High School: 9 10 11 12 College: 1 2 3 4 5 6

Major educational field of concentration: _____

5. EXPERIENCE

Please describe current occupation and previous work experience relevant to this application.

Dates worked: _____

Employer: _____ Job title: _____

Duties: _____

Dates worked: _____

Employer: _____ Job Title: _____

Duties: _____

6. SKILLS AND INTERESTS

Check special skills you have that you wish to share as a volunteer:

- | | |
|--|--|
| <input type="checkbox"/> Backpacking/camping | <input type="checkbox"/> Hand/power tools |
| <input type="checkbox"/> Botany | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Carpentry/construction | <input type="checkbox"/> Public speaking |
| <input type="checkbox"/> Computer/programming | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Drawing/graphics | <input type="checkbox"/> Trail maintenance |
| <input type="checkbox"/> First aid/CPR | <input type="checkbox"/> Typing/clerical |
| <input type="checkbox"/> Fisheries biology | <input type="checkbox"/> Wildlife biology |
| <input type="checkbox"/> Foreign language(s) | <input type="checkbox"/> Working with people |
| <input type="checkbox"/> Gardening/plant propagation | <input type="checkbox"/> Writing/editing |
| <input type="checkbox"/> Other (specify) _____ | |

Please describe experience(s) paid or unpaid, in the skills listed above. Be sure to include number of months/years and level of this experience.

Please list other interests, hobbies, and personal qualifications.

Some positions require hiking/backpacking alone, traveling cross country or route finding, and crossing steep snowfields. How comfortable do you feel under these types of conditions?

7. HEALTH

List and describe any physical limitations that may affect your ability to perform your duties as a volunteer (some positions require being outdoors in harsh weather conditions, at high altitudes, or require walking, hiking, or lifting).

8. REFERENCES

List two references (not relatives) we may contact to verify your qualifications.

Name: _____ Phone () _____

Address (include zip code): _____

Capacity Known _____

Name: _____ Phone (): _____

Address (include zip code): _____

Capacity Known _____

Can we make your name, address, phone number and/or E-mail address available to other volunteers?
____ YES _____ NO

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Notice to Volunteer

Volunteers are not considered to be 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 understands s/he may be subject to a background check. This check may include a criminal history inquiry.**

Privacy Act Statement

Following information is provided to comply with the Privacy Act (PL 93-579). 5 U.S.C. 301 and 7 CFR 260 authorize acceptance of information requested on this form. The data will be used to contact applicants and to interview, screen, and select them for volunteer assignment. Furnishing this data is voluntary.

Signature of Applicant (sign in ink): _____ Date: _____

If under 18, name of parent or guardian: _____

Signature of parent or guardian: _____ Date: _____