| 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 18.  |  |
|--|---|---|--|
| 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  |  |
| Botany Pes Campground Host Min Construction Maintenance Nat Computers Offi Fish/Wildlife Rar Res  8. What qualifications/skills/experience/education   | torical/ Pres<br>st/Disease C<br>nerals/ Geole<br>tural Resour<br>ice/Clerical<br>nge/Livestoc<br>search/Libra<br>do you have | Soil/ Watershed Control Timber/Fire Prevention Trail/Campground Maintenance Tour Guide/Interpretation Visitor Information Other (Please specify) Trian That you would like to use in your volunteer work? |  |
| Biology Hors Boat Operation Land Carpentry Land Clerical/Office Machines Live Computer Programming Map Drafting/Graphics Mou Driver's License Pho First Aid Certificate Pub                              | NY Equipments Ses – Care/ dscaping/Red Surveying Sestock/Ranco reading Suntaineering Stography Search/Libra                   | other Trade skills (Please specify)  hing  Teaching  Working with People  Writing/Editing  Other (Please specify)   |  |
| 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?  |   |   |  |
| 12. Would you like to supervise other volunteers?  |   |   |  |
| 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 vo  | olunteer wo   | k?  |  |

| January       February       March       April       May         July       August       September       October       November  | June<br>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.  |   |  |  |  |
| <ul> <li>Specify your lodging needs:</li> <li>I will furnish my own lodging (such as tent; camper; own, relative's, or friend's place)</li> <li>I will require assistance in finding lodging</li> </ul>  |   |  |  |  |
| <ul> <li>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?</li> <li>Yes</li> <li>No (Please specify)</li> </ul>   |   |  |  |  |
| 19. This is provided for more detailed responses. Please indicate the item numbers to which these responses apply:   |   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
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| Burden Statement   |   |  |  |  |
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