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| VOLUNTEER SERVICE APPLICATION—NATURAL & CULTURAL RESOURCES | | | | | | | | | | | | | | | | |
| This optional application helps federal land and water management agencies identify interested and qualified candidates for available volunteer positions. Applications are submitted and processed locally for each position. If a volunteer commits to a specific volunteer activity, they are required to complete an OF-301a Volunteer Service Agreement. Mark **X** in the appropriate boxesand print or type all responses. | | | | | | | | | | | | | | | | |
| 1. Name (Last, First) | | | 2. Date of Birth      /     / | | | 3. Telephone Number (   )     - | | | | | 4. Email Address | | | | |
| 5. Street Address, Apt. # | | | | | 6. City | | | | | | | 7. State | | | 8. ZIP code |
| 9. Which general categories are you most interested in volunteering? Check all that apply. | | | | | | | | | | | | | | | | |
| Archaeology  Botany  Campground/Site host  Campground maintenance  Construction maintenance  Computers  Conservation education | | GIS/GPS  Fish/Wildlife  Historical/Preservation  Pest/Disease control  Minerals/Geology  Natural resources planning  Office/Clerical  Range/Livestock | | | | | | Research/Librarian  Soil/Watershed  Timber/Fire prevention  Trail maintenance  Tour guide/Interpretation  Visitor information  Other (Please specify) | | | | | | | | |
| 10. What qualifications, skills, or experiences do you have that you would like to use as a volunteer? Check all that apply. | | | | | | | | | | | | | | | | |
| Backpacking/Camping  Biology  Boat operation  Carpentry  Clerical/Office machines  Computer programming  Drafting/Graphics  Driver’s license  First aid certificate | | Hand/Power tools  Heavy equipment operation  Horses – care/ riding  Landscaping/Reforestation  Land surveying  Livestock/Ranching  Map reading or GIS/GPS  Mountaineering  Photography | | | | | | | Public speaking  Research/Librarian  Sign language  Supervision  Other trade skills (Please specify)  Teaching  Working with people  Writing/Editing  Other (Please specify) | | | | | | | |
| 11. What languages are you proficient in? Check all that apply. | | | | | | | | | | | | | | | | |
| Arabic  Chinese  English  French | | German  Hindi  Japanese  Korean | | | | | | | Lahanda/ Punjabi  Portuguese  Russian  Spanish  Other (Please specify) | | | | | | | |
| 12. If you have a specific volunteer interest, please identify and describe your qualifications, skills, experiences, or education that may apply. | | | | | | | | | | | | | | | | |
| 13. Are you a United States Citizen or Permanent Resident?  Yes, I am a U.S. citizen or Permanent Resident      No, I am not a US Citizen or Permanent Resident      (if applicable, list visa type\_\_\_\_\_\_\_\_\_\_\_\_) | | | | | | | | | | | | | | | | |
| 1. a. Have you volunteered before?  Yes  No   b. If yes, please list the organization where you volunteered with a contact name and phone # or email address, and briefly describe what you did. | | | | | | | | | | | | | | | | |
| 1. Would you like to supervise other volunteers?  Yes  No | | | | | | | | | | | | | | | | |
| 1. What are some of your objectives for volunteering? (Optional) | | | | | | | | | | | | | | | | |
| 1. Please list any physical limitations that may impact your volunteer activities. | | | | | | | | | | | | | | | | |
| 1. a. Which months are you available to volunteer? Check all that apply. | | | | | | | | | | | | | | | | |
| January  July | February  August | | | March  September | | | April  October | | | May  November | | | | June  December | | |
| 18b. How many hours per week would you be available for volunteer work? Hours  18c. Which days are you available to volunteer? Check all that apply.  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday | | | | | | | | | | | | | | | | |
| 1. Specify states or locations where you would like to volunteer. | | | | | | | | | | | | | | | | |
| 1. Specify your lodging needs:   I will furnish my own lodging  I will require assistance in finding lodging | | | | | | | | | | | | | | | | |
| 1. Are you willing to have your application forwarded to other federal offices or agencies, if no opportunity exists at the location to which you applied, and if there are known alternatives appropriate to your interests and experience?   Yes  No (Please specify) | | | | | | | | | | | | | | | | |
| 1. How did you hear about this volunteer opportunity? Check all that apply.  | Volunteer.gov  Other website  Advertisement  Word of mouth (friend, colleague, family member) | Brochure  Volunteer fair or event  Other (Please specify) | | --- | --- | | | | | | | | | | | | | | | | | |
| **Burden Statement**  Completing this form is voluntary, but failure to provide the information will prevent program participation. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1093-0006. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of the Interior (USDOI), U.S. Department of Agriculture (USDA), U.S. Department of Defense (USDOD), and U.S. Department of Commerce (USDOC) are equal opportunity providers and employers and prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means of communication of program information should contact the volunteer program to which they are applying. If you would like to file a Section 508-related complaint, please contact the DOI Section 508 Program via email at [section508@ios.doi.gov](mailto:section508@ios.doi.gov) or phone (202) 208-1530. | | | | | | | | | | | | | | | | |
| Notice to Volunteer  Volunteers are NOT considered Federal employees except as otherwise provided by law. 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) they may be subject to a reference check, background check, and/or criminal history inquiry. | | | | | | | | | | | | | | | | |
| Privacy Act Statement  Collection and use is covered by Privacy Act System of Records INTERIOR/DOI–05 Interior Volunteer Services File System (which may be viewed at <https://www.doi.gov/privacy/doi-notices>) and OPM/GOVT–1 General Personnel Records (which may be viewed at <https://www.opm.gov/information-management/privacy-policy/#url=SORNs>) and is consistent with the provisions of 5 USC 552a (Privacy Act of 1974), which authorizes acceptance of the information requested on this form. The information is used to identify persons interested in participating in a government volunteer program, managing the volunteer program, including tort claims and injury compensation. Records or information contained in this system may be disclosed outside the agencies participating in this program as a routine use pursuant to 5 U.S.C. 552a(b)(3. Completing this form is voluntary, but failure to provide the information will prevent program participation. | | | | | | | | | | | | | | | | |
| 1. Signature | | | | | | | | | | | | | 21. Date | | | |