



Volunteer Application

Form/Profile

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (home) _____ (office) _____

E-mail address: _____

I. Skills and Interests

A. Education Background: _____

B. Current Occupation: _____

C. Hobbies, skills, interests: _____

D. Previous Volunteer Experience: _____

II. Preferences in Volunteering

Is there a particular type of volunteer work in which you are interested? (Please check all that apply.)

- Leading guided programs (prairie walks, wagon rides, historical and cultural programming) public, school student, and Scout audiences
- Provide program support (program set up, maintain resource collections, etc.)
- Resource monitoring (plant surveys, raptor monitoring, breeding bird surveys)
- Research, training, or an individual project
- Public speaking, fundraising, etc.
- Working on maintenance/improvement projects
- Other: _____

Is there a person or group with whom you are particularly interested in working? (Check all that apply.)

- No preference Adults Seniors
- Children (preschool elementary high school)
- Other: _____

Are there any groups with which you would not feel comfortable working?

- No Yes (please list): _____

(over, please)

III. Availability

At what times are you interested in volunteering? (Please check all that apply.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evenings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Seasonal availability only. (List months available)_____

Do you have reliable transportation you can use for volunteer work?_____

IV. Background Verification

A. Have you ever been convicted of a criminal offense? No Yes

B. Have you ever been charged with neglect, abuse, or assault? No Yes

C. Do you have any physical limitations or are you under any course of treatment, which might limit your ability to perform certain types of work? No Yes (explain below)

D. Please list two non-family references that we might contact:

Name_____ Phone:_____

Name_____ Phone:_____

The next formal Basic Volunteer Skills Training is planned for February 2007.

Second Saturday enrichment classes, mentoring and one-on-one training are available in the interim.

How did you hear about us?

Saw job description Flyer Volunteer Center or other agency

Referred by friend/volunteer Attended program Other:_____

The information on this form is true and complete.

Signature

Date

Please return completed application to:

Sara Aufderhar
Plains Conservation Center
21901 E. Hampden Ave.
Aurora, CO 80013

Questions? Call 303-693-3621