



# Volunteer Application 2012

## Contact Information

Name	
Street Address	
City, State & Zip Code	
Home Phone	
Cell Phone	
Email Address	
Date of Birth	

## Emergency Contact

In case of emergency, contact: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

## Interests

Which areas interest you?

- Administrative (Mailings, filing, database entry)
- Animal Care (Must be 18+, interview required)
- Gift Shop (Counting inventory, stocking shelves, etc.)
- Docent (Greet visitors and lead tours of facility)
- Education Programs (Program prep, staff booth, assist with educational programs)
- Facilities (Gardening, maintenance, construct exhibits)
- Fundraising
- Gift Shop
- Other \_\_\_\_\_

## Special Skills

Do you have special skills? Tell us!

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## Availability

When are you able to volunteer?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							

## References

Please list two references (not family):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## Agreement & Signature

Thank you for wanting to volunteer at the National Marine Life Center (NMLC). As a volunteer you represent NMLC to the public. With that in mind, we appreciate your willingness to read these policies and abide by them:

❖ Age Requirement:

- Volunteers must be at least 14 years of age
- Animal Care Volunteers must be at least 18 years of age

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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.

I authorize NMLC to contact my references and process my CORI prior to making a final determination on my application. I understand that by volunteering at NMLC I do not hold NMLC liable if I am injured during any volunteer activity.

Please sign in agreement of the above terms:

\_\_\_\_\_ Date: \_\_\_\_\_

If volunteer is less than 18 years of age, a parent or guardian must sign:

\_\_\_\_\_ Date: \_\_\_\_\_

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**Please Do Not Write Below This Line**

Application Received By: \_\_\_\_\_

Date: \_\_\_\_\_

References Checked By: \_\_\_\_\_

Date: \_\_\_\_\_

CORI Received and Checked By: \_\_\_\_\_

Date: \_\_\_\_\_