| 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 box 19. |           |  |  |
|---|---|--|-----------|--|--|
| 1. Name (Last, First, Middle)   | 2. Age  | 3. Telephone Numbe   | r         | 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 Conservation Education Rar Fish/Wildlife Res  8. What qualifications/skills/experience/education Backpacking/Camping Hea | torical/ Pres<br>st/Disease C<br>erals/ Geolo<br>ural Resour<br>ce/Clerical<br>nge/Livestoc<br>search/Libra<br>do you have<br>avy Equipme | ervation control ogy ces Planning ck rian e that you would like to ent Operation   |           | Soil/ Watershed Fimber/Fire Prevention Frail/Campground Maintenance Four Guide/Interpretation Frail/Campground Maintenanc |  |
| Boat Operation Lan Carpentry Lan Clerical/Office Machines Live Computer Programming Map Drafting/Graphics Moo Driver's License Pho First Aid Certificate Pub  | ses – Care/<br>dscaping/R<br>d Surveying<br>estock/Ranc<br>o reading<br>untaineering<br>otography<br>olic Speaking<br>search/Libra        | eforestation<br>g<br>hing<br>g   | in box    | Other Trade skills (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?  |   |  |           |  |  |
| 11. a. Have you volunteered before?   |   |  |           |  |  |
| 12. Would you like to supervise other volunteers?   Yes   No  |   |  |           |  |  |
| 13. What are some of your objectives for working as a volunteer? (Optional)   |   |  |           |  |  |
| 14. Please specify any physical limitations that ma   | ay influence  | your volunteer work ac   | ctivities | S:   |  |

| 15. a. Which months would you be available for volunteer work?    January  | ne<br>cember      |  |  |  |  |
|--|-------------------|--|--|--|--|
| 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>17. 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</li> </ul>  |                   |  |  |  |  |
| 19. This box is provided for more detailed responses. Please indicate the item numbers to which these responses  | es apply:         |  |  |  |  |
|  |                   |  |  |  |  |
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| Notice to Volunteer  |                   |  |  |  |  |
| Volunteers are not considered 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(s) understand(s) s/he may be subject to a reference check, background check, and/or criminal history inquiry.   |                   |  |  |  |  |
| Privacy Act Statement  |                   |  |  |  |  |
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| 20. Signature (Sign in ink)  | ords of           |  |  |  |  |