THE ZOOD IN FOREST PARK Forest PARK Zoological Society

THE ZOO IN FOREST PARK AND

EDUCATION CENTER

Springfield, Massachusetts

VOLUNTEER APPLICATION

| Name: | _ Date of Application: |
|-----------------------------------|------------------------|
| Season: Fall Winter/Spring Summer | Year: |
| Address: | |
| City: | State: Zip Code: |
| Phone: | or |
| Email: | |
| | |
| Availability | |
| Dates available: to | |
| What days are you available? | |
| Mon Tues Weds Th | ursFriSatSun |

| OUR PROGRAM | M | | | | |
|------------------|-------------------|---------------------|---------------|---------------|--------|
| Field of Focus: | Animal Care | Business/Office | Education | Horticulture | Other: |
| | | | | | |
| How did you hea | r about our Vol | unteer Program? | | | |
| | | | | | |
| | | | | | |
| Why are you inte | prested in intern | ing at the Zoo in F | orest Park ar | d Education C | enter? |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Experience |
|--|
| Have you been a volunteer here before? Yes No If so, when? |
| Describe any other previous volunteer work you have done: |
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| |
| |
| |
| Describe any experience, skills, or course work is relevant to your desired volunteer field: |
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□ *I Agree

I understand and agree that submitting this application form does not automatically register me as a Zoo in Forest Park volunteer, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures as outlined during the interview process, before I may begin volunteering.

I understand that background checks are conducted for ALL potential volunteers ages 18 and up.

The Zoo in Forest Park Volunteer program requires a one time fee of \$25 to cover the initial expenses of the program, including shirt, training materials, parking pass, CORI and SORI checks, etc. This fee is payable upon acceptance into the program, and is **not** required at the time of application.

By signing and submitting this form, I attest that the information I have provided is true and accurate and I agree to the terms and requirements stated above.

| Si | gnature: |
|----|----------|
| 21 | gnature. |

Date: _____

Send to: The Zoo in Forest Park PO Box 80295 Springfield, MA. 01138-0295 Email: <u>fpzinternvolunteercoordinator@gmail.com</u> Fax: (413) 733-2330