# 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 item 19.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1. Name (Last, First, Middle)</td>
<td>2. Age</td>
</tr>
<tr>
<td>3. Telephone Number</td>
<td>4. Email Address</td>
</tr>
<tr>
<td>5. Street Address (include apartment no., if any)</td>
<td>6. City, State, and Zip Code</td>
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</tbody>
</table>

7. Which general volunteer work categories are you interested in?

- [ ] Archeology
- [ ] Botany
- [ ] Campground Host
- [ ] Construction Maintenance
- [ ] Computers
- [ ] Conservation Education
- [ ] Fish/Wildlife
- [ ] Historical/Preservation
- [ ] Pest/Disease Control
- [ ] Minerals/Geology
- [ ] Natural Resource Planning
- [ ] Office/Clerical
- [ ] Range/Livestock
- [ ] Research/Librarian
- [ ] Soil/Watershed
- [ ] Timber/Fire Prevention
- [ ] Trail/Campground Maintenance
- [ ] Tour Guide/Interpretation
- [ ] Visitor Information
- [ ] Other (please specify)

8. What qualifications/skills/experience do you have that you would like to use in your volunteer work?

- [ ] 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
- [ ] Land Surveying
- [ ] Livestock/Ranching
- [ ] Map Reading
- [ ] Mountaineering
- [ ] Photography
- [ ] Public Speaking
- [ ] Research/Librarian
- [ ] Sign Language
- [ ] Supervision
- [ ] Other Trade Skills (Please specify)
- [ ] Teaching
- [ ] Working with People
- [ ] Writing/Editing
- [ ] Other (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? ☐ Yes ☐ No (If no, additional information may be required)

11. a. Have you volunteered before? ☐ Yes ☐ No
   b. If yes, please briefly describe your volunteer experience.

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 may influence your volunteer work activities:
<table>
<thead>
<tr>
<th>15a. Which months would you be available for volunteer work?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ January  ☐ February  ☐ March  ☐ April  ☐ May  ☐ June</td>
</tr>
<tr>
<td>☐ July   ☐ August   ☐ September  ☐ October  ☐ November  ☐ December</td>
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<table>
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<tr>
<th>15b. How many hours per week would you be available for volunteer work?</th>
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<tbody>
<tr>
<td>Hours</td>
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<table>
<thead>
<tr>
<th>15c. Which days per week would you be available for volunteer work?</th>
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<tbody>
<tr>
<td>☐ Monday  ☐ Tuesday  ☐ Wednesday  ☐ Thursday  ☐ Friday  ☐ Saturday  ☐ Sunday</td>
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<tr>
<th>16. Specify at least three states or specific locations within a state where you would like to do volunteer work.</th>
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<tr>
<th>17. Specify your lodging requirements:</th>
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<tbody>
<tr>
<td>☐ I will furnish my own lodging (such as a tent; camper; own, relative’s, or friends place).</td>
</tr>
<tr>
<td>☐ I will require assistance in finding lodging.</td>
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<tr>
<th>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/interest?</th>
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<tbody>
<tr>
<td>☐ Yes  ☐ No (Please specify)</td>
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<th>19. This is provided for more detailed responses. Please indicate the item number to which these responses apply:</th>
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**Burden Statement**

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 0596-0080. 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.

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**Notice to Volunteer**

Volunteers are not considered to be 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) she/he may be subject to a reference check, background check, and/or criminal history inquiry.

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**Privacy Act Statement**

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<table>
<thead>
<tr>
<th>19. Signature (Sign in ink)</th>
<th>20. Date</th>
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</table>
1. Is there a specific position that you are interested in applying for?

2. Is there a specific location in Yosemite where you would like to work?

3. Have you volunteered in Yosemite before?
   - Yes  □  No  □
   If yes:
   - What was your position?
   - When did you volunteer?
   - Who was your supervisor?

4. Volunteer housing in the park is limited, and you must volunteer at least 32 hours/week to qualify for housing. If you were to be selected to volunteer in Yosemite, what would your housing needs be?
   - □ No housing is needed. I live in the area and would commute to my position
   - □ I have a tent, but would need a campsite
   - □ I have an RV and would need a campsite with utilities
   - □ I have an RV and would be okay with a campsite without utilities
   - □ I would need a bed in a house or apartment if I volunteered in Yosemite

Any additional Comments: