

# St. Marks National Wildlife Refuge Volunteer Application

Thank you for your interest in volunteering.

The Visitor Center (VC) is open Monday – Friday from 8:00 am until 4:00 pm, and on Saturday and Sunday from 10:00 am until 5:00 pm. The Refuge is open from sunrise until sunset.

Date \_\_\_\_\_

Full Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_

What positions have you held professionally?

	<u>Position</u>	<u>Organization</u>	<u>Years of Service</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Education: College/University: \_\_\_\_\_

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

## Optional

Do you have any medical conditions you would like us to be aware of?  Yes  No

If yes, please describe: \_\_\_\_\_

Do you require any special accommodations?  Yes  No

If yes, please describe: \_\_\_\_\_

## D. Skills and Interests (Please check all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Computer/Internet               | <input type="checkbox"/> Organizing/Scheduling          |
| <input type="checkbox"/> Public speaking – large groups  | <input type="checkbox"/> Public speaking – small groups |
| <input type="checkbox"/> Public relations/Communications | <input type="checkbox"/> Research                       |
| <input type="checkbox"/> Teaching/Training               | <input type="checkbox"/> Writing                        |
| <input type="checkbox"/> Data Entry                      | <input type="checkbox"/> Proofing/editing               |
| <input type="checkbox"/> General Office Work             | <input type="checkbox"/> Copying/mailouts               |
| <input type="checkbox"/> Birding tours                   | <input type="checkbox"/> Driving for tours              |
| <input type="checkbox"/> General Maintenance             | <input type="checkbox"/> Sales, cash register           |
| <input type="checkbox"/> Other _____                     |   |

What clubs, organizations, or associations are you involved with? \_\_\_\_\_

\_\_\_\_\_

Have you had previous experience as a volunteer? Yes No If yes, with what organizations and what kind of work did/do you do? \_\_\_\_\_

What are your hobbies and interests? \_\_\_\_\_

References: Please list two references who are not related to you.

<b>Name</b>	<b>Phone</b>	<b>Relationship (friend, co-worker, etc.)</b>
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1. _____	_____	_____
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2. _____	_____	_____
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Describe any other talents, training or experiences you have that relate to volunteering at the Refuge:

\_\_\_\_\_

What months of the year would you be available to work? \_\_\_\_\_

What day(s) of the week would you be available to work and how many hours per week could you give?

\_\_\_\_\_

*NOTE:* A background check may be required for some positions.

*I declare that the information provided in this application are true and complete to the best of my knowledge.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed application to: Volunteer Coordinator  
St. Marks NWR  
P. O. Box 68  
St. Marks, FL 32355

Refuge Phone: 850-925-6121  
Fax: 850-925-6930