

Oglebay's Good Zoo Adult Volunteer Application

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____

Is it OK to contact you at work? Yes No E-mail _____

Employment/Education Background

Education: Please check level completed
 High School College Graduate School

Degree(s) _____ Area of Study _____

Employment:
 Retired Currently Employed Job Title _____

Employer _____

Volunteer Experience:
Please list other volunteering experiences _____

Skills/Interests (Check all that apply)

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Art | <input type="checkbox"/> Theater/Storytelling |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Graphics | <input type="checkbox"/> Sign/Foreign Language |
| <input type="checkbox"/> Computer | <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Photography | <input type="checkbox"/> Model Trains |
| <input type="checkbox"/> Research | <input type="checkbox"/> Child Care | <input type="checkbox"/> Model Building |

Please list any other hobbies/skills/special interests _____

Do you have any animal experience? yes no If yes, please give details. _____

Availability

What time(s) can you commit to training and/or volunteering?

Weekdays Morning Afternoon Evening Flexible
Weekends Morning Afternoon Evening Flexible

What day(s) of the week would you prefer for training and/or volunteering?

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Personal or Professional References (Please exclude relatives)

1. Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

2. Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

3. Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

What do you hope to gain from your volunteer experience at the zoo? _____

Please check all areas where you would be interested in volunteering.

- | | |
|---|--|
| <input type="checkbox"/> School group programs/tours | <input type="checkbox"/> Research (Stream monitoring, bird watching) |
| <input type="checkbox"/> Horticulture | <input type="checkbox"/> Animal Care Assistant |
| <input type="checkbox"/> Summer Zoo Camps for children | <input type="checkbox"/> After-hours events |
| <input type="checkbox"/> Miniature Train Display | <input type="checkbox"/> Zoo Library |
| <input type="checkbox"/> Discovery Lab (interactive exhibit area) | <input type="checkbox"/> Narration for Train Ride |
| <input type="checkbox"/> Interpretation at Animal Exhibits/Artifact Carts | |
| <input type="checkbox"/> Traveling education programs/public speaking | |
| <input type="checkbox"/> Special Event (Boo at the Zoo, Member's Day, etc.) | |

Your signature indicates your approval for us to check references. Oglebay's Good Zoo is not obligated to provide placement in the volunteer program, nor are you obligated to accept the volunteer position.

Signature _____ Date _____

Please return this form to: Volunteer Program, Oglebay's Good Zoo, Oglebay Park, Wheeling, WV 26003