VOLUNTEER APPLICATION

Black Hills Raptor Center PO Box 9713, Rapid City SD 57709 605-381-9707

info@blackhillsraptorcenter.org

	Date:									
	Full Legal Nam	ne <u>:</u>								
	Name you pre	fer to b	e called	:						
	Address:									
	City:	Sta	ite:		Zip:	i		_		
	Phone:									
	Birthday: / / Social Security No:you are interested in giving school programs)								(need	led if
	E-Mail Address	s:								
	Highest level o	of educ	ation co	mpleted <u></u>						
	Availability (<u>please</u>	circle th	<u>e times</u>	you are	able to	volun	teer)		
Time	e Mornings (9a	m – 1p	om) A	Afternoo	ns (1pm	– 5pm)	Eves:	(after	5pm)
Days	5	Mon.	Tues.	Wed.	Thurs	.Fri.	Sat.	Sun.		

Positions What type of work are you interested in? Indicate preference as follows: X = most preferred; 0 = next in preference; leave blank those of no interest.

Construction & Maintenance	Meet and Greet presentations
Painting, wood preservation	School and community programs
Grant Writing	Special Events (fundraisers)
Bird food preparation	
Editing & Writing	

Emergency Contact(s):

1. Name:	
 Name: Their Relationship to you: 	
3. Phone:	
Your Occupation: E	Employer:
References: A person not related to your qualifications:	you, whom we may contact about
Name	Phone
With which other organizations are you	affiliated?
Do you have any other volunteer exper	rience? If so, what?
What leisure activities do you enjoy?	
Please list any misdemeanor or felony o	convictions and or felony arrests

(other than routine traffic violations) you have had as an adult.

Our education volunteers often deal with the public, including many school children, so volunteers wishing to work in these types of positions will be subject to a criminal background check. Approval and commencement of Volunteer activities may not begin until a background investigation is satisfactorily completed.

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that my application and the information herein is, or may be, subject to an appropriate background investigation, and furthermore, I understand that should an investigation disclose untruthful or misleading information, my application may be rejected, my name removed from consideration, or my volunteer activities with Black Hills Raptor Center terminated.

Signature	Date
If you are under the age of 18, please h Sign that they have read and understan are applying.	, ,
Parent or guardian Signature	Date

Please return the completed application to:

Black Hills Raptor Center PO Box 9713, Rapid City SD 57709 info@blackhillsraptorcenter.org