VOLUNTEER APPLICATION

Black Hills Raptor Center PO Box 48 Caputa, SD 57725 605-381-9707 info@blackhillsraptorcenter.org

Date:	
Full Legal Name:	
Name you prefer to be called:	
Address:	
City: State: Zip:	
Phone:	
Birthday:/ /	
Social Security No:	(needed if you are interested in giving
school programs)	
E-Mail Address:	
Highest level of education completed:	

Availability (please circle the times you are able to volunteer)

Time	Mornings (9am – 1pm)			Afternoons (1pm – 5pm)				Eves: (after 5pm)
Days	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:
2. Their Relationship to you:
3. Phone:
Your Occupation: Employer:
References: A person not related to you, whom we may contact about your qualifications:
Name: Phone:
With which other organizations are you affiliated?
Do you have any other volunteer experience? If so, what?
What leisure activities do you enjoy?

Please list any misdemeanor or felony 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.

If you are under the age of 18, please have your parent or legal guardian sign that they also have read this and understand the volunteer role for which you are applying.

Parent / Guardian Signature_____ Date _____

Please return the completed application to:

Black Hills Raptor Center PO Box 48 Caputa, SD 57725

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