

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 & Building Maintenance		Phone Team
	Painting, wood preservation		Gardens and Grounds Maintenance
	Educational Programs		Special Events (fundraisers)
	Ambassador Care		
	Rescue and Transport Team		

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.*

Signature _____ Date _____

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
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