

VOLUNTEER INFORMATION

Date: _____

Name: _____

Address: _____

Phone: (Home) _____

(Work) _____

(Cell) _____

Email: _____

Age: 13 – 15 16 – 23 24 or older

Have you ever volunteered before? Yes No If yes, where?

Do you have a valid Driver's License? Yes No

Do you have first-aid training? Yes No If yes, describe below.

Are you going to be volunteering on a regular basis? Yes No

If planning on volunteering regularly, what days/times are you available?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Times Available							

What job functions would you be interested in performing?

- Mentor (science education)
 - Classroom
 - Field
 - Both
- Field Support (restoration/monitoring/resource survey)
 - Local
 - Backcountry (overnight)
- Development
 - Public Outreach
 - Fundraising
 - Grants
- Office Support
- Events (planning, coordination, support)

What locations are you interested in volunteering at?

- Western Oregon (Portland\Salem)
- Central Oregon (Sisters, Bend, Madras)
- Southwest Washington (Vancouver\White Salmon)

Briefly share with us your interests, education, and skills.

How did you learn about Wolfree?
