Volunteer Application Form

Personal Information
Name: _______________________________________________________
       First     Middle    Last
Address: _____________________________________________________
         _______________________________________________________
Phone
   Home: _____________________ OK to call me here___
   Work: _____________________ OK to call me here___
   Mobile: _____________________ OK to call me here___
E-mail: _______________________________________________________

Demographics
Date of birth:  Month _______ Day _________ Year ________* optional

Education:
_________________________________________________________________

Employer
Please list your most recent employer, if applicable
Name: _____________________________________________________________
Responsibilities: _____________________________________________________
_________________________________________________________________

Availability
Week Days:          _______________________________
Week Day Evenings:      _______________________________
Weekend Days:        _______________________________
Weekend Evenings:      _______________________________
### Volunteer Preferences – Check all that apply

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<table>
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<tbody>
<tr>
<td>Gardening</td>
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<tr>
<td>Natural Lands Management</td>
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<tr>
<td>Office/Computer Work</td>
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<td>Assisting with Events</td>
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<td>Greeting Visitors</td>
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<td>Leading Tours</td>
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<td>Assisting with Educational Programs</td>
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<td>Writing/Graphic design</td>
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<td>Photography</td>
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### Emergency Contact

In the event of an emergency whom should we notify?

Name: _____________________________________________________________

Home phone: ______________________
Work phone: ______________________
Cell phone: ______________________
E-mail: __________________________________________
Relationship: _______________________

Additional Information you would like to share with us: ______________________
_____________________________________________________________________
_____________________________________________________________________

By signing below, I attest that the information I have provided on the form is true and accurate.

Signature: ______________________ Date: ______________________

If you have questions about any of the above, please contact 814-867-2591.

**Please mail your completed form to the following address:**

Volunteer Coordinator
The Arboretum at Penn State
320 Forest Resources Building
University Park, PA 16802