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|--|---|--|---------------------|
| <b>Volunteer Application<br/>For Natural Resources Agencies</b>  |   | Instructions: Mark "x" in the appropriate boxes.<br>For other items, either print or type responses<br>If extra space is needed use item 18. |                     |
| 1. Name (Last, First, Middle)  |   | 2. Age   | 3. Telephone Number |
| 4. Email Address   |   | 5. Street Address (include apartment number, if any)   |                     |
| 6. City, State, and Zip Code   |   | 7. Which general volunteer work categories are you most interested in?   |                     |
| <input type="checkbox"/> Archeology  | <input type="checkbox"/> Historical/Preservation    | <input type="checkbox"/> Soil/ Watershed   |                     |
| <input type="checkbox"/> Botany  | <input type="checkbox"/> Pest/Disease Control       | <input type="checkbox"/> Timber/Fire Prevention  |                     |
| <input type="checkbox"/> Campground Host   | <input type="checkbox"/> Minerals/Geology           | <input type="checkbox"/> Trail/Campground Maintenance  |                     |
| <input type="checkbox"/> Construction Maintenance  | <input type="checkbox"/> Natural Resources Planning | <input type="checkbox"/> Tour Guide/Interpretation   |                     |
| <input type="checkbox"/> Computers   | <input type="checkbox"/> Office/Clerical            | <input type="checkbox"/> Visitor Information   |                     |
| <input type="checkbox"/> Conservation Education  | <input type="checkbox"/> Range/Livestock            | <input type="checkbox"/> Other (Please specify)  |                     |
| <input type="checkbox"/> Fish/Wildlife   | <input type="checkbox"/> Research/Librarian         |  |                     |
| 8. What qualifications/skills/experience/education do you have that you would like to use in your volunteer work?  |   |  |                     |
| <input type="checkbox"/> Backpacking/Camping   | <input type="checkbox"/> Heavy Equipment Operation  | <input type="checkbox"/> Sign Language   |                     |
| <input type="checkbox"/> Biology   | <input type="checkbox"/> Horses – Care/Riding       | <input type="checkbox"/> Supervision   |                     |
| <input type="checkbox"/> Boat Operation  | <input type="checkbox"/> Landscaping/Reforestation  | <input type="checkbox"/> Other Trade skills (Please specify)   |                     |
| <input type="checkbox"/> Carpentry   | <input type="checkbox"/> Land Surveying             |  |                     |
| <input type="checkbox"/> Clerical/Office Machines  | <input type="checkbox"/> Livestock/Ranching         | <input type="checkbox"/> Teaching  |                     |
| <input type="checkbox"/> Computer Programming  | <input type="checkbox"/> Map reading                | <input type="checkbox"/> Working with People   |                     |
| <input type="checkbox"/> Drafting/Graphics   | <input type="checkbox"/> Mountaineering             | <input type="checkbox"/> Writing/Editing   |                     |
| <input type="checkbox"/> Driver's License  | <input type="checkbox"/> Photography                | <input type="checkbox"/> Other (Please specify)  |                     |
| <input type="checkbox"/> First Aid Certificate   | <input type="checkbox"/> Public Speaking            |  |                     |
| <input type="checkbox"/> Hand/Power Tools  | <input type="checkbox"/> Research/Librarian         |  |                     |
| 9. Based on boxes checked in items 6 and 7, what particular type of volunteer work would you like to do? (Please describe any specific qualifications, skills, experience, or education that apply.) |   |  |                     |
| 10. a. Have you volunteered before? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>b. If Yes, please briefly describe your volunteer experience.  |   |  |                     |
| 11. Would you like to supervise other volunteers? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |                     |
| 12. What are some of your objectives for working as a volunteer? (Optional)  |   |  |                     |
| 13. Please specify any physical limitations that may influence your volunteer work activities:   |   |  |                     |

14a. Which months would you be available for volunteer work?

January       February       March       April       May       June  
 July       August       September       October       November       December

14b. How many hours per week would you be available for volunteer work? Hours:

14c. Which days per week would you be available for volunteer work?

Monday       Tuesday       Wednesday       Thursday       Friday       Saturday       Sunday

15. Specify at least three states or specific locations within a state where you would like to do volunteer work.

16. Specify your lodging requirements:

I will furnish my own lodging (such as tent; camper; own, relative's, or friend's place).  
 I will require assistance in finding lodging.

17. If a volunteer assignment is not available at the location specified in item 15, do you want your application forwarded to another location or Federal agency seeking volunteers with your background/interest?

Yes       No (Please specify)

18. This is provided for more detailed responses. Please indicate the item numbers to which these responses apply:

#### Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0080. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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#### Notice to Volunteer

Volunteers are not considered to be Federal employees for any purposes other than tort claims and injury compensation. Volunteer service is not creditable for leave accrual or any other benefit. However, volunteer service is creditable work experience.

#### Privacy Act Statement

Collection and use is covered by Privacy Act System of Records OPM/GOVT-1 and USDA/OP-1, and is consistent with the provisions of 5 USC 552a (Privacy Act of 1974), which authorizes acceptance of the information requested on this form. The data will be used to maintain official records of volunteers of the USDA and USDI for the purposes of tort claims and injury compensation. Furnishing this data is voluntary, however, if this form is incomplete, enrollment in the program cannot proceed.

19. Signature (Sign in ink)

20. Date