Form 1114-10 (January 2001)				
UNITED STATES		Instructions: Mark "x" in appropriate boxes. For other		
DEPARTMENT OF THE		_	t or type responses. If extra space is	
BUREAU OF LAND MANAGEMENT VOLUNTEER APPLICATION		needed, use item	17.	
1. Name (Last First Middle)		2 4 22	3. Telephone	
1. Name (Last First Midate)		2. Age	()	
4. Street Address (include apartment number, if any)		5. City, State, and Zip Code		
6. Which general volunteer work categories are you most interest in?				
Archaeology	Historical/Preservation	Riparian		
Botany	Minerals/Geology	Soil/Watershed		
Campground Host	Natural Resources	Trail/Campground Maintenance		
Construction/Maintenance	Office/Cleric	Tour Guide/Interpretation		
Computers	Pest/Disease Contr	Visitor Information		
Fire Prevention	Range/Livestock	Wild Horses		
Fisheries/Wildlife	Recreation/Wilderness	Other:		
Forestry	Research/Library			
7. What qualifications/skills/experience/education do you have that you would like to use in your volunteer work?				
Backpacking/Camping	Drivers License	Public Speaking		
Biology	First Aid/CPR Certificates	Research/Librarian		
Boat Operation	Foreign Language:			
Carpentry	Hand/Power Tools	Supervision		
Clerical/Office Machines	Heavy Equipment Operation	Other Trade Skills		
Computer Programming	Horses-Care/Riding	Teaching		
Computer Software:	Landscaping/Reforestation		orking with People	
	Land Surveying		riting/Editing	
Defensive Driving Training	Livestock/Ranching		ther	
Drafting/Graphics	Map Reading/Orienteering	_		
Drive Standard Trans.	Mountaineering			
Drive 4 x 4s	Photography			
8. Based on boxes checked in items 6 and 7, what particular type of volunteer work would you like to do? (Please describe specific qualifications, skills, experience, or education that apply)				
9a. Have you volunteered before? Yes No 9b. If yes, please briefly describe your volunteer experience.				
10. Would you be willing to supervise other volunteers? Yes No				
11. What are some of your objectives for working as a volunteer?				

12. Please specify any physical/medical limitations that may influence your volunteer work activities. Include allergies, medications, etc.:					
13a. Which months would you be available for volunteer work?					
January February March April May June July August September October November December					
13b. How many hours per week would you be available for volunteer work? Hours:					
Monday Tuesday Wednesday Thursday Friday Saturday Sunday					
14. Specify at least three states or specific locations within a state where you would like to do volunteer work:					
15. Specify your lodging requirements: I will furnish my own lodging (such as tent, camper, trailer, own home, relative's or friend's home) I will require assistance in finding lodging					
16. If a volunteer assignment is not available at the locations specified in item 14, do you want your application forwarded to another location or Federal agency seeking volunteers with your background/interest? Yes No					
17. This space is provided for more detailed responses. Please indicate the item numbers to which these responses apply:					
18. REFERENCES (include name, address, telephone number and relationship):					
1. 2.					
3					
NOTICE TO VOLUNTEER					
Volunteers are not considered to be, nor are they, federal employees for any purposes other than Federal tort claims, injury compensation, loss or damage to personal property, and situations involving assaults, threats, and batteries while engaged in the performance of their official duties.					
Volunteers are not permitted by Federal law, nor should they be assigned to perform: (1) any law enforcement work (2) any hazardous duty (3) any work in the policymaking process. Volunteers may also be required to undergo background checks, provide requested information, and					
authorize the disclosure of information pertaining to themselves for this purpose. Volunteer service does not quality for Federal leave accrual or					

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act (PL 93-579) 5 U.S.C. 301 and 7 CFR 260 authorized acceptance of the information requested on this form. The data will be used to contact applicants and to interview, screen, and select them for volunteer assignments. Furnishing this data is voluntary.

19. Signature: (Sign in ink)	Date:	

any other benefit. However, volunteer service can be credited as work experience.