



**U.S. Department of the Interior
Bureau of Land Management**

Volunteer Application



Instructions: Mark "x" in appropriate boxes. For other items, either print or type responses. If extra space is needed use item 17.

1. Name (Last, First, Middle)

2. Age

3. Telephone

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4. Street Address (include apartment No., if any)

5. City, State, and Zip Code

6. Which general volunteer work categories are you most interested in?

- | | | |
|---|---|---|
| <input type="checkbox"/> Archaeology | <input type="checkbox"/> Historical/Preservation | <input type="checkbox"/> Riparian |
| <input type="checkbox"/> Botany | <input type="checkbox"/> Minerals/Geology | <input type="checkbox"/> Soil/Watershed |
| <input type="checkbox"/> Campground Host | <input type="checkbox"/> Natural Resources Planning | <input type="checkbox"/> Trail/Campground Maintenance |
| <input type="checkbox"/> Construction/Maintenance | <input type="checkbox"/> Office/Clerical | <input type="checkbox"/> Tour Guide/Interpretation |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Pest/Disease Control | <input type="checkbox"/> Visitor Information |
| <input type="checkbox"/> Fire Prevention | <input type="checkbox"/> Range/Livestock | <input type="checkbox"/> Wild Horses |
| <input type="checkbox"/> Fisheries/Wildlife | <input type="checkbox"/> Recreation/Wilderness | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Forestry | <input type="checkbox"/> Research/Library | |

7. 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"/> Driver's License | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Biology | <input type="checkbox"/> First Aid/CPR Certificates | <input type="checkbox"/> Research/Librarian |
| <input type="checkbox"/> Boat Operation | <input type="checkbox"/> Foreign Language: _____ | <input type="checkbox"/> Sign Language |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Hand/Power Tools | <input type="checkbox"/> Supervision |
| <input type="checkbox"/> Clerical/Office Machines | <input type="checkbox"/> Heavy Equipment Operation | <input type="checkbox"/> Other Trade Skills: _____ |
| <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Horses-Care/Riding | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Computer Software: _____ | <input type="checkbox"/> Landscaping/Reforestation | <input type="checkbox"/> Working with People |
| | <input type="checkbox"/> Land Surveying | <input type="checkbox"/> Writing/Editing |
| <input type="checkbox"/> Defensive Driving Training | <input type="checkbox"/> Livestock/Ranching | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Drafting/Graphics | <input type="checkbox"/> Map Reading/Orientation | _____ |
| <input type="checkbox"/> Drive Standard Trans. | <input type="checkbox"/> Mountaineering | |
| <input type="checkbox"/> Drive 4 x 4s | <input type="checkbox"/> 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? _____
