

VOLUNTEER APPLICATION Mount Rogers National Recreation Area Jefferson National Forest		3714 Highway 16, Marion, Virginia 24354 Phone: (276) 783-5196 or 1-800-628-7202 Fax: (276) 783-5504	
1. Name of Applicant (Name of Group & Leader if applicable)		2. Social Security Number	3. Date of Birth
4. Street Address (include apartment number, if any)		5. City, State, and Zip Code	
6. Telephone Number(s)		7. Email Address (optional)	
8. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	9. Racial/Ethnic Data (Mark one only) <input type="checkbox"/> White (not Hispanic) <input type="checkbox"/> Black (not Hispanic) <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander		
10. Have you ever been charged or convicted of a misdemeanor or felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			
11. Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate state/number _____. If you have a personal vehicle, would you be willing to use it to access the work site(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
12. Please specify any physical limitations that may influence your volunteer work activities:			
13. Which general volunteer work categories on the Mount Rogers National Recreation Area are you most interested in?			
<input type="checkbox"/> Trail Maintenance	<input type="checkbox"/> G.P.S. Data Collection	<input type="checkbox"/> Fish & Wildlife Management	
<input type="checkbox"/> Adopt-a-Trail	<input type="checkbox"/> Recreation Site Maintenance	<input type="checkbox"/> Hunter Safety	
<input type="checkbox"/> Backcountry Patrol	<input type="checkbox"/> Visitor Center Staff	<input type="checkbox"/> Range/Livestock	
<input type="checkbox"/> Bike Trail Patrol	<input type="checkbox"/> Interpretive Programs	<input type="checkbox"/> Fire Prevention	
<input type="checkbox"/> Horse Trail Patrol	<input type="checkbox"/> Environmental Education	<input type="checkbox"/> Soil/Watershed	
<input type="checkbox"/> Horse Camp Hosting	<input type="checkbox"/> Computer /Website Design	<input type="checkbox"/> Archeology	
<input type="checkbox"/> Campground Hosting	<input type="checkbox"/> Office/Clerical	<input type="checkbox"/> Student Internship	
<input type="checkbox"/> Litter Pick-Up	<input type="checkbox"/> Photography	<input type="checkbox"/> Mount Rogers Interpretive Association	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	
14. Based on boxes checked in item 13, what particular type of volunteer work would you like to do? (Please describe any specific qualifications, skills, experience, or education that may apply). Additional space on back if needed.			
15. Is there a particular place within the Mount Rogers National Recreation Area that you are most interested in? (a specific trail, wilderness, campground, recreation site, visitor center, watershed, or community?)			

16. Have you volunteered before on a National Forest? Yes No

If yes, briefly describe your volunteer experience including the name of the National Forest and dates of service (month/yr).

17. Would you like to supervise other volunteers? Yes No

18. Which months will you be available for volunteer work?

March

June

September

December

April

July

October

January

May

August

November

February

19. Do you have a preferred start work and finish work date? _____.

20. How many hours per week are you available for volunteer work? _____.

21. Which days per week are you available for volunteer work?

Monday Tuesday Wednesday Thursday Friday Saturday Sunday Holiday weekends? _____.

22. Specify your lodging requirements:

I have no need for lodging accommodations.

I need a campsite. I will provide my own tent or trailer.

I need a campsite and require water & electrical hook-ups. Specify any other required amenities _____.

I need lodging in a house or cabin with a bed. I'll provide my own bedding.

List other options or requirements. _____.

23. Please provide the names of **two references** including their address, phone number(s), and relationship to you (i.e. employer, professor, etc.)

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.

Volunteers under 18 years of age will require signed parental or guardian consent prior to performing any work.

Privacy Act Statement

Following information is provided to comply with the Privacy Act (PL 93-579). 5 U.S.C. 301 and 7 CFR 260 authorize 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.

24. Signature (sign in ink)

25. Date