

Skills and Experience

Employment: I am Currently Employed Retired Student Other

Name and Contact of Current Employer _____

Have you volunteered before? Yes No If yes where _____

Please make a check mark next to the type of work you would like to do while volunteering, please also check whether you have past **Experience** in the work or if you have an **Interest** in gaining experience in the work.

<input type="checkbox"/> Customer Service Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Accounting Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Grounds Maintenance Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Writing / Editing Experience <input type="checkbox"/> Interest <input type="checkbox"/>
<input type="checkbox"/> Interpretation Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Retail Sales Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Painting Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Desktop Publishing Experience <input type="checkbox"/> Interest <input type="checkbox"/>
<input type="checkbox"/> Teaching Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Fundraising Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Construction Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Exhibit building Experience <input type="checkbox"/> Interest <input type="checkbox"/>
<input type="checkbox"/> Sign Language Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Store Management Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Landscaping/Gardening Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Illustration Experience <input type="checkbox"/> Interest <input type="checkbox"/>
<input type="checkbox"/> Public Speaking Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Data Entry Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Building Maintenance Experience <input type="checkbox"/> Interest <input type="checkbox"/>	<input type="checkbox"/> Photography Experience <input type="checkbox"/> Interest <input type="checkbox"/>

Is there a group you are particularly interested in working with?

- Seniors Adults
- High School / Middle School Youth Elementary Age Youth
- People with Disabilities Pre-school Age Youth

Are there any groups you would prefer not to work with? If so please note _____

Background Information

How did you hear about this volunteer opportunity?

- From Park Staff Referred by a Friend
- Website Trade show or Event
- RSVP Program Other _____

Do you hold a current CPR/ First Aid Certification Yes NO

Please List **3 references** that are familiar with your work quality. Do not include relatives.

Name: _____ Relationship _____ Phone: (____) _____ - _____

Name: _____ Relationship _____ Phone: (____) _____ - _____

Name: _____ Relationship _____ Phone: (____) _____ - _____

Have you ever been convicted of or entered a plea of guilty, no contest, or had a withheld judgment to a felony or a misdemeanor? Yes No

If Yes Please explain _____

I, _____, hereby certify the information provided by me on this application is true and correct to the best of my knowledge and belief. I hereby grant the state of Montana, Montana Fish, Wildlife & Parks, my permission to verify the facts contained in this application. I hereby authorize release of any relevant information such as reference checks, driving records, criminal history, education, work history and background for verifying my eligibility to volunteer with Montana Fish, Wildlife & Parks.

Applicant Signature _____ Date _____ Date of Birth ____/____/____

(Required for background check)

Signature of Parent of Legal Gaurdian (If Under 18) _____ Date _____