



SANTA BARBARA ZOO VOLUNTEER APPLICATION

Santa Barbara Zoo • 500 Ninos Drive, Santa Barbara, CA 93103 • (805) 962-5339
www.sbzoo.org

9/28/2005

Personal Information

Date: _____

Name: Last _____ First _____

Address: Street _____

City _____ State _____

Zip _____

Phone Number: Home _____ Cell _____

Work _____

Email: _____

Are you 21 years old or over? _____

Skills and Experience

Work Experience [List professional and/or current volunteer work]:

Education [Secondary, Undergrad, Graduate (list highest)]:

Special Skills [List all courses, training, training experience which might relate to your work as a volunteer (e.g. public speaking, education, etc.)]:

Do you speak any foreign language? [If yes, please list experience level]:

How did you hear about us? ___ Zoo website ___ Friend/Word of mouth ___ Newspaper ___ School

Other _____

Area(s) of Interest (Check all that Apply)

What skills or interests would you particularly like to use as a volunteer?

Adult Opportunities

- Animal care aide
- Docent (Volunteer Educator)
- Clerical
- Facilities/Grounds Beautification
- Special Events
- Storytime Reader
- Animal Research

Youth Opportunities

- Counselor-in-training (CIT)
- Special Events

- Other: _____

Availability

Please indicate the days & times you are typically available to volunteer:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening*							

*Special events only

References

Please list two references:

Name: _____

Phone: _____

Email: _____

Relationship: _____

Name: _____

Phone: _____

Email: _____

Relationship: _____

Please read and agree to the following:

By completing and submitting this form, I acknowledge that I am personally offering my services as a volunteer to the Santa Barbara Zoo solely for civic, charitable or humanitarian reasons, without promise, expectation, or receipt of compensation or benefits.

I specifically authorize the Santa Barbara Zoo to contact my references, and any and all other persons or organizations for any and all information bearing upon my character and qualifications for volunteer work. I request and authorize all persons and organizations to furnish the information so requested. I hereby certify that all statements made in my application are true and complete, and I understand that any misstatement of material facts will subject me to disqualification or dismissal.

Signed: _____

Date: _____

Please return to our Volunteer Coordinator by mail/drop off at the Zoo, or fax:

500 Niños Drive, Santa Barbara, CA 93103 or fax to: (805) 560-9889

Office Use Only:

<input type="checkbox"/> Orientation _____	<input type="checkbox"/> Name Tag _____
<input type="checkbox"/> Interview _____	<input type="checkbox"/> Uniform [If applicable] _____
<input type="checkbox"/> Training _____	<input type="checkbox"/> Volunteer PIN _____
<input type="checkbox"/> Placement _____	<input type="checkbox"/> Start Date _____
<input type="checkbox"/> End Date _____	