

Nearby Nature Volunteer Questionnaire

Name _____ Date _____

Address _____ City _____ Zip _____

Home Phone _____ Cell _____ Work Phone _____ E-Mail _____

Best time to reach _____ Birthdate (optional) _____

1. Why do you want to volunteer for Nearby Nature?

2. Please list any special skills, experiences, or expertise that you could share with Nearby Nature.

3. List a few of your hobbies or interests.

4. Briefly describe your educational background.

5. Briefly describe your occupation (if applicable).

6. When are you available to volunteer? Please list specific hours/days if possible. About how often would you like to volunteer?

7. Where did you hear about Nearby Nature?

8. Please mark the projects that interest you below.

- | | |
|---|---|
| <input type="checkbox"/> Leading school nature walks | <input type="checkbox"/> Photographing or video-taping events |
| <input type="checkbox"/> Assisting with costumed <i>Kinder Critter</i> programs | <input type="checkbox"/> Doing Learnscape gardening/maintenance |
| <input type="checkbox"/> Helping with weekend <i>Nature Quests</i> | <input type="checkbox"/> Building repairs/maintenance |
| <input type="checkbox"/> Assisting with summer daycamps | <input type="checkbox"/> Serving on our Board of Directors |
| <input type="checkbox"/> Assisting at the Network Charter School | <input type="checkbox"/> Posting fliers |
| <input type="checkbox"/> Assisting with elementary classroom visits | <input type="checkbox"/> Participating in mailing parties |
| <input type="checkbox"/> Assisting with elementary No School Day programs | <input type="checkbox"/> Helping with fundraising projects |
| <input type="checkbox"/> Annual special events (<i>Haunted Hike/etc.</i>) | <input type="checkbox"/> Working on the Web page |
| <input type="checkbox"/> Staffing activity booths at community festivals | <input type="checkbox"/> Contributing to newsletters |
| <input type="checkbox"/> Working on environmental restoration projects | <input type="checkbox"/> Helping with office work |
| <input type="checkbox"/> Doing litter patrol | <input type="checkbox"/> Other _____ |

9. Emergency contact: Name: _____ Phone: _____ Relationship: _____

10. References:

- Name: _____ Phone: _____ Relationship: _____
- Name: _____ Phone: _____ Relationship: _____