



Sequoia Park Zoo and Foundation
VOLUNTEER APPLICATION



First Name Last Name (M/F) Birthday (MM/DD/YY)

Street Address City State Zip Code

 Phone Number Email (please check preferred method of contact)

Emergency Contact Person Phone Number Relationship

Describe your goals for volunteering at Sequoia Park Zoo: _____

Which volunteer program are you applying for?

___ **Animal Care Volunteer** (ages 18+)

___ **ZIP** (**Z**oo **I**nterpreter **P**rogram, ages 16+)

___ **Monkey Business** (administrative tasks, ages 18+)

___ **YAK** (**Y**outh **A**ssistant **K**eeper, June-August; ages 11-15)

___ **Zoo Crew** (maintenance tasks, ages 18+)

Community Service – group or individual (circle one)

Describe: _____

Do you have any relevant, previous experience? If so, please explain:

Do you speak any languages fluently other than English: _____

Are you interested in volunteering for Special Events: (please circle one) YES / NO

Please list your availability:

Monday: _____

Friday: _____

Tuesday: _____

Saturday: _____

Wednesday: _____

Sunday: _____

Thursday: _____



Do you have any allergies or medical conditions, if so please explain: _____

Acknowledgement

The information in this application is true and complete, and I have not knowingly withheld any information. I understand that a misrepresentation may be cause for dismissal. I authorize verification of all information contained in this application. I understand that as a volunteer at the Sequoia Park Zoo, I will be expected to demonstrate a commitment to uphold the mission of the organization, to focus on customer service, be respectful to all employees, volunteers, and guests, and maintain an environment for people and animals alike.

As a volunteer at the Sequoia Park Zoo, I agree to follow all Zoo guidelines and policies. In addition, I give consent to the Sequoia Park Zoo to provide emergency medical attention in the event I am not able to give consent, nor my emergency contact is available. I understand and agree that the City of Eureka Parks and Recreation Department will conduct a background check on behalf of the Sequoia Park Zoo. I am aware that the Sequoia Park Zoo has the right to release me from service at any time, just as I have the right to withdraw from volunteer service at any time.

I have read and understand this agreement and am signing it voluntarily.

X _____ Date: _____

Volunteer Signature

If volunteer if under the age of 18, parent/guardian signature is required.

X _____ Date: _____

Parent/Guardian Signature

OFFICE USE ONLY

_____ Completed Packet Received

_____ Sent to Personnel

_____ Orientation

_____ Data Entered

_____ First Day Volunteered

_____ Last Day Volunteered

Notes:

CITY OF EUREKA
VOLUNTEER APPLICATION FORM

Name _____ Position Title _____
Address _____ City _____ Zip _____
Date of Birth _____ Home Phone _____ Business Phone _____
E-Mail _____ Do you have a valid Driver's License? Yes ___ No ___
State _____ Number _____ Class _____ Expiration _____ SSN _____

List any course work and /or training, which may be applicable:

RELATED EXPERIENCE: List your job experience below. Voluntary, non-paid experience will be accepted if job related. Explain fully the duties you performed. You may attach additional sheets if necessary. Failure to complete all required information will cause your application to be rejected.

FROM _____ TO _____	Title of Your Position _____
Name and Address of Employer _____ _____ _____	Duties You Performed _____ _____ _____
Phone Number _____	_____
Name of Supervisor _____	_____
Reason for leaving _____	No. of Hours worked per week _____

A "YES" ANSWER TO ANY OF THE NEXT 3 QUESTIONS REQUIRES AN EXPLANATION BELOW

A. Have you ever been employed by the City of Eureka: Yes ___ No ___ From _____ to _____ Department _____	
B. Are you related to anyone currently employed by the City of Eureka? Yes ___ No ___ Name _____ Department _____	

ADDITIONAL INFORMATION: Use this space to provide additional information as required by this application, or to describe in greater detail any aspects of your experience that are pertinent to the job you are seeking.

CERTIFICATED OF APPLICANT-PLEASE READ CAREFULLY

I have read and understand all the information contained in this application. I authorize the release of information concerning my qualifications, character, or prior record to the City of Eureka through inquires to any sources. I certify that all statements in this application are true and complete: that there are no misrepresentations, falsifications, or omissions of material fact and I am aware that any misstatements or omissions of material fact may cause rejection of my application, disqualification from competing for, or discharge from any employment in this jurisdiction. Furthermore, I may be required to submit verification of any information provided on this application. I further understand that to work with youth I will be fingerprinted prior to my employment.	
Signature _____	Date _____



SEQUOIA PARK ZOO Community Service Volunteer

Thank you for your interest in volunteering at the Sequoia Park Zoo. Community Service Volunteers enjoy rewarding experiences of working at the Zoo on improvement projects to help further the zoo's mission. While each service project is a little different this application packet contains information about the Community Service Volunteer Program and the paperwork required. Please read and complete the following questions.

VOLUNTEER REQUIREMENTS

Applicants for this program must be at least 18 years of age or under direct adult supervision. Must be able to complete service projects during regular Zoo hours between 9 and 5pm Monday through Sunday. Volunteers must be able to take direction and complete tasks in a timely manner. Volunteers will be asked to create a project with Volunteer Coordinator that suits volunteer interests and current Zoo needs. Volunteers will set and adhere to a schedule that is agreed upon by both volunteers and designated Zoo staff. Each individual or group must meet with Volunteer Coordinator to determine their project and schedule before starting their service hours. Please answer the following questions as they apply.

How many hours of community service are you looking to complete: _____

Are your hours mandated: Yes/No If yes, by who: _____

What are your areas of interest: _____

What is the time frame for your project: _____

When would you like to have your hours completed by: _____

Please list any requirements you need to fulfill for your affiliated organization: _____

What is your purpose or goal for volunteering: _____

Community Service Groups ONLY:

Number of volunteers: _____

Please attached a separate sheet of paper with names and an * for any volunteer(s) under the age of 18

Leader's Name: _____

Contact Information: _____

Phone

Email

Name of affiliated organization: _____

APPLICATION PROCESS

1. Speak with the Volunteer Coordinator about your volunteer requirements and possible
2. Visit www.sequoiaparkzoo.net
3. Read all materials carefully and fill out all forms completely.
4. Meet with Volunteer Coordinator to determine project and schedule.
5. Once approved with Volunteer Coordinator, begin project by signing in and out at ticket booth.