



# SQUAM LAKES NATURAL SCIENCE CENTER

PO Box 173, Holderness, NH 03245 • 603-968-7194 • Fax: 603-968-2229 • www.nhnature.org

## Volunteer Interests and Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

(Please Print) Last First

### Primary Mailing

Address: \_\_\_\_\_  
Street City State Zip Code

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Seasonal Mailing

Address: \_\_\_\_\_  
Street City State Zip Code

Seasonal Phone: \_\_\_\_\_ Seasonal Address Dates: \_\_\_\_\_

Are you currently, or have you previously been, a member of the Science Center?  Yes  No

## Volunteer Opportunities

Please check all the volunteer opportunities that appeal to you

### Education

\_\_\_ **Educator Assistant:** assist Naturalists with lake education on boats or with summer Guided Discoveries programs.

\_\_\_ **Docents:** provide trail interpretation for visitors. Use props and some live animals. Requires 40 hours training and minimum age of 18 years old.

\_\_\_ **First Guide:** provide trail interpretation for visitors. Use props and partner with a docent mentor. Requires 12 hours of training in first year. Must be between 14 and 17 years old.

### General Services

\_\_\_ **Animal Care Volunteer:** assist with cleaning and feeding of program animals. Requires training and a minimum commitment of 40 hours annually; must commit to one weekday per week; available September through June and be at least 18 years old.

\_\_\_ **Development:** work with fundraising, corporate giving, SLNSC committees.

\_\_\_ **Exhibit Volunteers:** use engineering,

carpentry, electricians, and artistic skills to create exhibits.

\_\_\_ **Garden:** prune, weed, and maintain beautiful Kirkwood Gardens. No gardening experience necessary.

\_\_\_ **Maintenance:** provide light pruning, spot cleaning, painting, raking, and minor repairs.

\_\_\_ **Marketing:** post fliers, do internet research, update marketing contacts.

\_\_\_ **Office Assistants:** help with data entry, mailings, filing, or with our library.

\_\_\_ **Volunteer Instructor:** help naturalists lead interactive outdoor programs for school children. Requires classroom training.

### Special Events

\_\_\_ supervise games, assist with registration, setup, and clean-up. Includes Autumn Festival, Halloween Hoot 'n Howl, and Summer Gala.

### Visitor Services

\_\_\_ **Greeters:** greet school children as school buses arrive or greet visitors during summer months.

## Availability

Circle the seasons, or list the months, and circle the days of the week you are typically available to volunteer.

All Year Summer Fall Winter Spring

Any Day Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Specific months: \_\_\_\_\_

**Thank you for your interest in Squam Lakes Natural Science Center Volunteer Program!**

Volunteer Coordinator: Carol Raymond 603-968-7194 ext.22 or carol.raymond@nhnature.org

Over, please

**Tell us About Yourself!**

**Please summarize your education, employment, and volunteer experiences below or attach resume:**

**What hobbies and special skills would you be willing to share?** (e.g., scientific, computer, foreign language, music, acting, art, baking, or sewing)

**How did you hear about our Volunteer Program?**

**Why do you want to volunteer at the Science Center?**

**Legal Issues**

I am at least 18 years old and exempt from youth labor laws.

**Labor Laws for Youth**

Please request the appropriate form by checking the box below.

**Youth ages 12 - 15** are required by state labor laws to have a work permit to volunteer.

Please send me the Work Permit Form (We require a copy of your birth certificate.)

**Youth ages 16 and 17** are required to provide a work permission slip signed by a parent or guardian and a copy of your birth certificate.

Please send me the Permission Slip Form

**Background Checks**

Volunteers who assist in programs where they work directly with minors are required to have background checks. Science Center staff will provide further information and the necessary forms when needed.

**Criminal History**

Have you ever been convicted of a crime? If yes, please describe the nature of the crime.

**Yes**                       **No**

**References**

Please give the name, address, and phone number or e-mail address of two references, not related to you, who can speak about your professional, educational, or volunteer background.

1. \_\_\_\_\_ 2. \_\_\_\_\_  
\_\_\_\_\_

**Please Sign and Date Below**

I understand that completing this form helps the Science Center match my interests to the needs of the organization and does not guarantee that a match will be found. If accepted into the volunteer program, I will abide by the policies and procedures described to me during Volunteer Orientation.

I attest that the information on this form is true and I have not tried to misrepresent my experience, interests, or abilities, knowing that to do so is grounds for dismissal from the Science Center Volunteer Program.

I give my permission to contact references listed on this page. I also affirm that I am at least 12 years of age or older and can legally be accepted as a volunteer.

Signature \_\_\_\_\_ Date \_\_\_\_\_

If applicant is under 18 years old, signature of parent/legal guardian is required below.

I am a parent/legal guardian of a minor applicant and have read and agree with the information provided above.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_