

APPLICATION FOR VOLUNTEER SERVICE – Adults

Name: _____

Address: _____

City/State: _____ Zip Code: _____

Home Phone: (_____) _____ Cell: (_____) _____

Email: _____ Birthdate: _____ / _____ / _____

I am available (check all that apply): Weekdays Weekends Year round
 Winter Spring Summer Fall Mornings Afternoons Evenings

Emergency Contact Name: _____ Phone: (_____) _____

References:

a) Name: _____ Relationship: _____ Phone: (_____) _____

b) Name: _____ Relationship: _____ Phone: (_____) _____

1) Previous volunteer experience: _____

2) How many hours are you interested in volunteering?

_____ hrs/week _____ hrs/month _____ hrs/year

3) What types of volunteer opportunities interest you? Please check all that apply:

___ Assisting Naturalists with programs ___ Garden Maintenance ___ Canoe & Kayak Assistance
___ Special Events ___ Invasive species removal
___ Administrative Duties ___ Research projects/field Work
___ Front Desk Host ___ Live Animal Care

4) Briefly explain why you want to volunteer at the Environmental Education Center: _____

**Please note: A background check may be necessary for volunteers over 18 years of age.
The background check will be paid for by the Somerset County Park Commission.**

Signature of Applicant

Date: _____

For more information or to return a completed form, please contact: Gretchen Rotondo, grotondo@scparcs.org, ext. 5323



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