The Friends of the Robert Moses State Park Nature Center, Inc.



Volunteer Application

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date					
Last name		First name	Mi	ddle name_	
Street Address					
City	State	Zip Code			
Telephone		Social Security	y #		
Are you a U.S. citizen of required to provide doc			J.S. on an unrestricted	basis? (You	may be
Do you have any conce	rns with us perform	ming a background cl	heck? ☐ Yes ☐ No		
If yes, please describe	your concerns				
Volunteer Position Des	ired				
How did you hear of ou					
Are you presently empl					
Days & hours you'd lik					
Do you have any physic					
Education:					
School	Name and Location	1	Year Graduated	Major	Degree
High School					
College					
College					
Post-College					
Other Training					
In addition to your work	k history, are there	are other skills or vo	olunteer experience tha	t we should	consider?
					-
					-
Please list any other gro	oups you've volunt	eered for:			

Why do you want to volunteer?						
Employment History (List mos	st recent employer)					
Company Name			_			
Address	T	elephone	_			
Date Started Position	on					
Date Ended						
Name of Supervisor						
May we contact? ☐ Yes ☐ No						
Responsibilities			_			
Reason for leaving			-			
References						
List three personal references, not r	related to you, who have l	known you for more than one year.				
Name	Phone	Years Known	_			
Address			-			
Name	Phone	Years Known	_			
Address			-			
Name	Phone	Years Known	-			
Address			-			
Please Read Before Signing:						
· · · · · · · · · · · · · · · · · · ·	•	ion is true and complete to the best of, would alter the integrity of this ap	•			
employment or educational record. in any respect if a volunteer positio omissions, or answers made by mys	I agree that this company n is not extended, withdr self on this application. I	d as references to give any information and my previous employers will not awn, or terminated because of false of I accept a volunteer position with the pany in any communication distribution	ot be held liable statements, his company, I			
Signature		Date				