



ZOO GUIDE VOLUNTEER APPLICATION

NAME _____ DATE OF BIRTH _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____

WHAT IS / WAS YOUR OCCUPATION? _____

WHAT IS YOUR EDUCATIONAL BACKGROUND? _____

The Zoo Guide program requires a definite commitment of at least one year. The following questionnaire may help determine whether this program is right for you.

ARE YOU INTERESTED IN:

- Environmental education and conservation? Yes No
- Learning new facts and concepts about wildlife and conservation? Yes No
- Becoming a part of a team of passionate and committed volunteers? Yes No

ARE YOU COMFORTABLE:

- Educating the following audience members about wildlife conservation:
 - The general public? Yes No
 - Children of all ages? Yes No
 - People with special needs? Yes No
- Volunteering at the zoo in all kinds of weather? Yes No
- Helping out with special events, parties and school programs? Yes No
- Public speaking? Yes No

ARE YOU ABLE TO:

- Attend an 8 session training course on Sunday mornings from February through April 2010? Yes No
- Make the minimum required 1-year commitment (200 hours) to serve as a Zoo Guide after the training is completed? Yes No
- Volunteer on the following days*:
 - Two Sundays per month Yes No
 - Every Monday Yes No
 - Every Wednesday Yes No

**For 2010, we are not currently accepting applicants who can work on Tuesdays, Thursdays, Fridays or Saturdays.*

How did you hear about the Central Park Zoo volunteer program?

Why do you want to volunteer at the Central Park Zoo?

Please list any experience or special skills that you believe would be useful (teaching, public speaking, foreign language, etc.)

Person(s) to call in case of emergency include relationship and phone numbers

Have you ever worked for the Wildlife Conservation Society (WCS) or been involved in the volunteer program at the Bronx Zoo, Prospect Park Zoo , Queens Zoo , New York Aquarium or in the field?

When? _____ In what capacity? _____

To whom did you report? _____

Are you related to any WCS staff member or volunteer? No ____ Yes _____

(Please specify name and department) _____

Please give names and phone numbers of two persons to whom we may refer for professional references.

If accepted as a Central Park Zoo volunteer, I agree to be available for work 2 to 4 days per month, and to commit to at least one year of volunteer service at the Central Park Zoo. **I understand that I will be required to purchase a volunteer uniform and materials related to the training course (\$100) and that I will have NO direct animal contact.**

Signature _____ Date _____

Return completed application to:

cpzvolunteers@wcs.org

or

Coordinator of Volunteers
Education Department
Central Park Zoo
830 Fifth Avenue
New York, NY 10065