

Volunteer Application



Demographic Information:

Name: _____

Volunteer Type: Individual Business/Organization Family Group

Other: _____

Street Address: _____

City: _____

Phone: _____

Email Address: _____

Volunteer Interest:

Working with the public Working with living collections Property maintenance

Arboretum Office/Store Greeter Visitor Services Special Events/Programming

Collections/Trail/ Property Monitor Educational Programs Research

Data/Clerical Other: _____

Special Skills and Professional Experience:

Please list any skills, professional training, interests, hobbies, or other information that would assist us in providing you the best fit for your volunteering experience with us.

Availability:

When are you available to volunteer with us?

Frequently Occasionally On a project basis only Weekdays only Weekends only

Availability Details:

Why Volunteer:

Please let us know why you are interested in volunteering with Old Mountain Arboretum. You must complete this section to be considered for our volunteer program.

How did you hear about our volunteer program?

Personal References:

The arboretum's volunteer coordinator will email or call two personal references as part of the application process. Please list two references not related to you.

Name: _____

Relationship: _____

Years Known: _____

Telephone No: _____

Email Address: _____

Name: _____

Relationship: _____

Years Known: _____

Telephone No: _____

Email Address: _____

Other Personal Information You Would Like to Include:

Background Check:

Some positions or assignments may require a background check. Do we have your permission to request a background check?

Yes No

I Agree:

I understand and agree that submitting this application does not automatically register myself, my family, or my organization as an Old Mountain Arboretum volunteer. I also understand that there may be certain qualifications that must be met, including the acceptance of established volunteer policies and procedures, and/or approval by the Board of Directors before I may begin volunteering.

By signing this form below, I attest that the information I have provided is true and accurate.

Signature: _____

Date: _____

Thank you for your interest in volunteering at Old Mountain Arboretum! Get involved, make a difference, and help us promote an active, health, greener and growing Mississippi.