



FERNBANK[®]

MUSEUM OF NATURAL HISTORY

VOLUNTEER APPLICATION PLEASE PRINT CLEARLY

PERSONAL INFORMATION

Dr./Mr./Mrs./Ms./Miss _____

Date _____

Name _____

HEALTH LIMITATIONS

Address _____

Do you have any health limitations? Yes No

City _____ State _____ Zip _____

If so, please explain: _____

Home Phone _____

Cell Phone _____

Email _____

EMERGENCY CONTACT

Date of Birth _____ You must be 18 years or older to apply.

Name _____

Are you currently in school? Yes No

Phone _____

Anticipated Graduation Date _____

Relationship _____

CRIMINAL HISTORY

Have you ever been convicted of a crime? Yes No

If yes, please explain the nature of the crime and the date of the conviction and disposition. Conviction of a crime is not an automatic disqualification for volunteer work.

COMMUNITY SERVICE

Are you applying to fulfill court-mandated community service? Yes No

If yes, what was your offense? _____

Please note, court-mandated community service volunteers are required to pay a \$15 fee for a background check.

Community service hours to be completed _____ Date need to be completed by _____

Name of Community Service Coordinator/Probation Officer/Attorney _____

VOLUNTEER INFORMATION

HOW DID YOU HEAR ABOUT VOLUNTEERING AT FERNBANK?

- Live in the Neighborhood
- Friend
- Fernbank Email or Website
- Current Fernbank Member
- Volunteer Match
- Other _____

VOLUNTEER ROLES

Please choose your areas of interest. Two or more areas are encouraged!

- Greeter
- Theater Attendant
- Special Events
- Office/Clerical Support
- Forest Restoration
- Other _____

VOLUNTEER FACILITATOR

Additional Training Required

- A Walk Through Time in Georgia
- Animal Care
- UrbanWatch
- WildWoods
- Discovery Carts
- Exhibit



PHOTOGRAPHIC RELEASE

I hereby grant permission to Fernbank Museum of Natural History (the "Museum") to use my likeness in photographs and/or videos for any purposes relating to the Museum, without further permission from me and without any compensation. Additionally, I acknowledge the Museum's right to alter, crop or treat the photographs and/or videos at its discretion.

SIGNATURE

DATE

PLEASE READ CAREFULLY BEFORE SIGNING

I understand that this is an application for and not a commitment or promise to provide an opportunity to volunteer.

I further understand that by submitting this application I am consenting to the completion of a criminal history records check on myself and that this check will be made from public record resources. I hereby agree to release and hold harmless from liability any person or organization that provides information as well as the nonprofit named on this application.

I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with Fernbank Museum of Natural History, that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with Fernbank Museum of Natural History or my termination as a volunteer.

SIGNATURE

DATE

PLEASE RETURN COMPLETED APPLICATION TO:

Volunteer Office, Fernbank Museum of Natural History
767 Clifton Road NE, Atlanta, GA 30307

Fax: 404.929.6405

Email: Volunteer@FernbankMuseum.org

If you have any questions, please contact the Volunteer Department at 404.929.6340.