

**New York Aquarium - WCS
Animal Exhibits Department
Volunteer Applicant Personal Information**

Please Print Clearly in Ink or Type

*This form must be completed and submitted before any review of your application can proceed.
It is not a substitute for a resume, which is also required.*

Name _____ Date: _____

Name you would like to be called (ex. Robert – Rob) _____

Home Address _____ City _____ St _____ Zip _____

School Address _____

City _____ State _____ Zip _____

If you are away, what dates will you be in New York for possible interview? _____

Telephone: Home: (____) _____ Fax: (____) _____

Cell: (____) _____

Work: (____) _____ Please list your work phone *only* if you wish to receive calls there.

E-mail: _____

Preferred Division(s) _____ Available Start Date _____

If applying to volunteer in the Behavioral Husbandry or Sea Cliffs, I certify that I am at least 18 years of age, and that I am able to swim.

If applying to volunteer in the Conservation Hall or the Explore the Shore Divisions, I certify that I am at least 15 years of age.

(Signature)

(Signature)

EDUCATION

High School (Name) _____ Year Graduated or expected year of graduation _____

College (Name) _____ Year Graduated or expected and degree _____

Post Graduate (Name) _____ Year Graduated or expected and degree _____

WORK EXPERIENCE

Company _____ Dates _____

Duties _____

Company _____ Dates _____

Duties _____

Please turn over

New York Aquarium Animal Exhibits Department
Volunteer Applicant Personal Information (Continued)

Please Print Clearly

Name (Please repeat from other page): _____

Availability

Please circle which days you will *generally* be available (this is flexible)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Shirt Size (Circle One): S M L XL XXL

Computer Software Skills (Word, Excel, etc.) _____

VOLUNTEER EXPERIENCE

Organization: _____ Dates _____

Duties _____

Organization: _____ Dates _____

Duties _____

REFERENCES

Name _____ Telephone _____

Address _____

Relationship to applicant _____

Name _____ Telephone _____

Address _____

Relationship to applicant _____

RECEIVED by Volunteer Office:

Forwarded to:

Behavioral Husbandry (BH):

Conservation Hall (CH):

Explore the Shore (ES):

Sea Cliffs (SC):