



Virginia Master Naturalist Program Volunteer Information and Application Form

Please complete and return to Kathleen.Ogilvy@dof.virginia.gov (preferred) or to the address on the last page of this application by November 19, 2009.

A. GENERAL INFORMATION *(Please print or type)*

Name:

Mailing Address:

County or Independent City of Residence:

B. CONTACT INFORMATION

Phone (please indicate which phone number is preferred): Home:
 Mobile:
 Business:

Email:

Emergency Contact:

Name: Phone: Day Evening

C. DEMOGRAPHIC INFORMATION *(Optional, for record keeping purposes only)*

Gender: Female Male

Race *(Check one)*: White African American American Indian
 Hispanic Asian Multi-Racial

Date of Birth:

D. EDUCATION, INTERESTS AND EXPERIENCE

Highest educational level completed:

List areas of study:

Please answer the following questions as fully as possible:

1. Which areas would you be interested in pursuing for volunteer work and further training?

- Ecology
- Taxonomy, classification, using keys
- Dendrology, forest ecology and management
- Native plants
- Watersheds and water quality
- Wetlands ecology and management
- Aquatic ecology
- Herpetology, reptiles and amphibians
- Mammals
- Ornithology, birds
- Urban/suburban ecology, habitat improvement
- Education, interpretation, speaking, research and writing
- Citizen science
- Other _____

2. Please answer the following questions regarding your interests and experience in volunteer projects. Describe any volunteer work you have done in the areas of

a) naturalist or other kinds of educational outreach (for example, talking to school groups, serving as a guide/answering questions)

b) environmental stewardship (for example, habitat restoration, stream clean-up)

c) citizen science (for example, stream monitoring, wildlife counts)

3. In which of the above types of projects are you most interested in participating? Why?

4. In what other volunteer activities have you recently participated (church, scouting, etc.)?

5. Do you prefer working with

- a. children
- b. adults
- c. either

6. When are you available to volunteer?

- a. Seasons of the year
- b. Day(s) of the week
- c. Time of day

Please note that the VMN Program is primarily a volunteer organization. To remain certified in Virginia a member is required to volunteer at least 40 hours per year on approved projects.

7. How much time would you be able to commit to planning and organizing?

8. Are you available for daytime volunteer work or field trips? Yes No

Weekdays? Yes No
Saturdays? Yes No
Sundays? Yes No

9. Are you able to attend Thursday evening training weekly from January-March? Yes No

10. Are you available to attend some Saturday or Sunday fieldtrips or volunteer projects?

Yes No

Note: Participating in two 5 hour fieldtrips on a weekend day will be required for certification.

E. REFERENCES

Name: Phone: Day Night

Address:

Name: Phone: Day Night

Address:

Name: Phone: Day Night

Address:

F. DRIVING INFORMATION

Do you have a current and valid driver's license? Yes No

If yes, issued in what state?

Do you have a current commercial driver's license (CDL)? Yes No

Do you currently have the minimum vehicle insurance coverage as required by the Commonwealth of Virginia?
Yes No

G. BACKGROUND INFORMATION

(This information will be kept in a confidential manner and accessible only to authorized personnel. It is required by the State Program. A "yes" answer does **not** automatically exclude you from becoming a registered volunteer.)

Have you ever had any criminal convictions related to:

1. alcohol or drug abuse? Yes No
2. child abuse or neglect? Yes No
3. spousal abuse? Yes No
4. elder abuse or neglect? Yes No

Have you ever been convicted of any violation(s) of law? Yes No

If volunteering for a position that requires the operation of a vehicle, have you been convicted of any moving traffic violations within the last 5 years? Yes No

If yes to any of the above, please describe.

I understand that records and criminal background or reference checks may be conducted on me at any time during the application process or during volunteer service for the Virginia Master Naturalist Program.

Signature, Volunteer

Date

H. VOLUNTEER AGREEMENT

I understand that I am a volunteer for the Virginia Master Naturalist Program and will receive no financial compensation or benefits for assistance rendered in any capacity.

I agree to abide by all policies and procedures of the Virginia Master Naturalist Program and its sponsoring agencies.

I understand that I am responsible for my personal injuries and illness while participating in this program, and that I will hold the program and all joint and sponsoring agencies harmless. I understand that my chapter adviser may file a claim for my injuries with the Virginia Division of Risk Management. If accepted, I understand that I or my insurance company may be fully or partially reimbursed. I understand that a claim filed with the Virginia Division of Risk Management does not guarantee acceptance or reimbursement.

I understand that the Virginia Master Naturalist Program is open to all, regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital and family status.

Signature, Volunteer

Date

Signature, Chapter Advisor

Agency

Date

I. MEDIA RELEASE

Virginia Cooperative Extension and the Virginia Master Naturalist Program periodically use photographs or video or audio footage or testimonials of program participants for local, regional, or state publicity or educational purposes. By my signature on this Volunteer Information form, I acknowledge receipt of this document and give permission for Virginia Cooperative Extension and the Virginia Master Naturalist Program to use such reproductions for educational and publicity purposes.

Signature, Volunteer

Date

If completing this form electronically, your signatures will be required on the form with your acceptance into the Master Naturalist Program.

Please return this form by November 19 to Kathleen.Ogilvy@dof.virginia.gov (preferred) or by mail to:

Virginia Master Naturalist-Riverine Chapter
c/o Kathleen Ogilvy
P.O. Box 241
Ashland, VA 23005

Training class cost will be \$100.00 plus additional fees for field trips and optional training materials. Volunteers accepted into the program will be notified in early December and the class fee is due with a letter of acceptance by December 17, 2009.

The Virginia Master Naturalist Program is sponsored jointly by the Virginia Cooperative Extension, the Virginia Department of Conservation and Recreation, the Virginia Department of Forestry, the Virginia Department of Game and Inland Fisheries, and the Virginia Museum of Natural History.

Virginia Master Naturalist programs and employment are open to all, regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. An equal opportunity/affirmative action employer.