



VOLUNTEER APPLICATION

Thank you for your interest in volunteering and welcome aboard!

How did you hear about Save Mount Diablo? (Please check one below)

- Friend/Family
 SMD Staff/Board
 SMD email
 Online
 School
 Workplace
 Friend/Family
 Tabling Event
 Other _____

I would like to volunteer for Save Mount Diablo because:

The following area(s) check listed below are types of volunteer work I am interested in:

<input type="checkbox"/> Help on our Land – lead a hike, property monitoring, stewardship projects, restoring our land with Diablo Restoration Team (DiRT) thru weeding, watering, planting etc.
<input type="checkbox"/> Help at the Office – bulk mailing, shredding, data entry, admin assist etc.
<input type="checkbox"/> Be an Ambassador – Represent SMD at events, trail heads, tabling booths
<input type="checkbox"/> Become an Events Extraordinaire – Join a committee, day of event help, or fundraising
<input type="checkbox"/> Be an Advocate – Assist with ballot measures, gather signatures, walk precincts, attend council meetings
<input type="checkbox"/> Other --

General Information

Please include at least one phone number where we can reach you during business hours and an email address that you check frequently. Your information is confidential.

First name: _____ M.I.: _____ Last Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Day phone: _____ Evening phone: _____

Cell Phone: _____ Email address: _____

Date of birth (optional): _____ Gender: _____ T-shirt size: _____

Physical Capabilities or Limitations

Do you have any physical limitations (difficulty standing, lifting, hearing, etc.) that may affect your ability to volunteer? If so, please describe briefly. _____



Emergency Contact

We will attempt to contact the following person in the event of a personal emergency.

First name: _____ Last Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Day phone: _____ Evening phone: _____

Cell Phone: _____ Email address: _____

Relationship: _____

Availability

Please indicate the days and time periods that you are generally available to serve. You may provide additional information regarding your availability in the space below.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Daytime:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anytime:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How many hours are you available per week? _____

Length of commitment? _____

Additional information regarding your availability: _____

Education

Education: _____

Major degree: _____

Occupation (optional)

Employer / Company name: _____

City: _____ State: _____ Phone: _____

Professional Skills and /or Special Abilities (check all that apply):

Fundraising Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Communication Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Computer Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Finance Skill?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Naturalist Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Land use planning Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other Skills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

List software with which you are competent: *(e.g. Word, excel, In Design, etc.)* _____

Additional skills: *(e.g. accounting, graphic design, etc.)* _____