

<u>Return to</u>: Utah States Parks Volunteer Services Coordinator 1594 W North Temple, Suite 116 P O Box 146001 Salt Lake City, UT 84114-6001 <u>OR</u> The Park you're interested in working at.

## **Volunteer Profile**

Please take a few minutes to fill out this profile. We would like to utilize your time and skills effectively, while ensuring you will enjoy your activities.

Name:				
Address:				
City, State, Zip+4:				
Telephone:	Hom	е		Work
Email:				
Volunteer position(s) you are inter	rested in:			
Camp Host Gift Shop Trails Other		Docent Office/Clerical Collection Manage		Visitor Center Maintenance Golf Course
Park area(s) you are interested in If you are interested in becoming In case of emergency contact:	a camp host	, what size of RV an	d year of manufac	cture do you have?
Telephone:		W		
Are you in school? Yes No Educational Degrees:	o Whe	ere?		
Additional Training:				
Are you currently employed? Y	′es No	Where?		
Reasons for volunteering:				
Spare Time School credit Other		Civic minded Learn new skills		Sharpen old skills Meet new friends
Do you have office experience?	Yes	No If yes, does	that experience i	nclude:
Answering phones/taking messages Writing memos/letters			Customer service/sales Computer experience	

Please list software you have used:					
List any experience and/or special skills that you bring to us!					
Do you speak any language(s) other than If yes, which language(s)?	-				
Which type of projects do you prefer?		Short term projects			
What types of groups would you like to wo	• • •				
School groups Adult tour groups	Special needs Retirement groups	One to one All types			
Please check any of the following that you	would like to do:				
clerical fund raising research trail guide gardening art works/crafts general maintenance golf course/pro shop	birding grant writing sign language exhibit guide program assistant outreach program special events other	carpentry natural sciences trail safety checks gift shop photography interpretive programs public relations			
Would you be available for "physical labor"	", such as moving items, hauling	, lifting more than 25 lbs?			
Yes No		, C			
Are there projects you would like to avoid?	Yes No If yes, pleas	e list:			
Months you are available:					
Which days would you like to work? (Plea	se check): M T W	Th F S Sun			
Would you prefer to work in the morning o	r afternoon? AM PM				
Hobbies and interests:					
List a minimum of one previous supervisor (paid or volunteer). Letters of recommend Name	-	your qualifications and work habits Phone			
Source of referral:					
Signed:	Date:				