

**New York Aquarium Animal Department
Volunteer Application**

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: _____

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

Home Address _____ City _____ State _____ 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 _____

In applying to volunteer in the any division, I certify that I am at least 18 years of age, and that I am able to swim.

(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 Department
Volunteer Application (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): XS S M L XL 2XL 3X 4X

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

VOLUNTEER EXPERIENCE

Organization _____ Dates _____

Duties:

Organization _____ Dates _____

Duties:

REFERENCES (Please provide two)

Name _____ Phone _____

Address _____

Relationship to applicant _____

Name _____ Phone _____

Address _____

Relationship to applicant _____