



# Volunteer Application

## Wolf Conservation Center



[www.nywolf.org](http://www.nywolf.org) P.O. Box 421 South Salem, NY 10590 Phone/Fax: (914) 763-2373

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### Personal Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone numbers: \_\_\_\_\_ *Mobile:* \_\_\_\_\_

*Work:* \_\_\_\_\_

e-Mail: \_\_\_\_\_

### Areas of Interest (check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Education                               | <input type="checkbox"/> Office Work             |
| <input type="checkbox"/> Facilities Construction and Maintenance | <input type="checkbox"/> Grants                  |
| <input type="checkbox"/> Grounds and Gardens                     | <input type="checkbox"/> Programs and Promotions |
| <input type="checkbox"/> Newsletter                              | <input type="checkbox"/> Development             |
| <input type="checkbox"/> Other— <i>please specify-</i>           | (fundraising, membership, etc.)                  |

Education (Include High School, College degrees, etc.): \_\_\_\_\_

\_\_\_\_\_

Work Experience: \_\_\_\_\_

\_\_\_\_\_

Volunteer Experience: \_\_\_\_\_

\_\_\_\_\_

Special Skills (Describe): \_\_\_\_\_

\_\_\_\_\_

Why are you interested in volunteering at the Wolf Center? \_\_\_\_\_

\_\_\_\_\_

When are you available? \_\_\_\_\_