

**VOLUNTEER APPLICATION***By authority of the Michigan Department of Natural Resources, completion is required for volunteer assignment consideration.*

The State of Michigan, as an Equal Opportunity Institution, complies with federal and state laws prohibiting discrimination and harassment, including Title IV and Title VII (with amendments) of the 1964 Civil Rights Act, Title IX of the Educational Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, Veterans Readjustment Act of 1974 as amended 38 USC 20.

To be completed by Organization/Group/Individual

Group or Organization Name(if any)		Group/Organization Telephone ()	Number of Individuals
Brief Organization Description			
Volunteer Name (Last, First, MI) Parent/Guardian/Group Leader		E-Mail Address	
Street Address		Drivers License Number	Date of Birth
City, State, ZIP		Volunteer Telephone (from 8 a.m. – 5 p.m.) ()	
Emergency Contact and Relationship		Emergency Contact Telephone ()	
I am available <input type="checkbox"/> Year-Round <input type="checkbox"/> Only during the following (<i>Example: from April to July, etc.</i>) Beginning (mm/dd/yyyy): _____ Ending (mm/dd/yyyy): _____			
Days/Times most convenient for you <input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends		From (<i>Example: from 9:30 a.m. to 2 p.m.</i>)	Max. Time Commitment (hours)
Do you have a vehicle and/or equipment you are licensed to operate and are willing to use in your volunteer assignment? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you interested in donating project materials, money, etc., for DNR volunteer projects? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please describe donation _____			
How did you learn about DNR volunteer opportunities? <input type="checkbox"/> News Media <input type="checkbox"/> DNR Employee <input type="checkbox"/> Other (<i>Explain</i>) _____			
What type(s) of Volunteer work are you willing and able to do?			
Why do you want to volunteer?			

CERTIFICATION

I certify that, by accepting an assignment as a Volunteer with the Michigan Department of Natural Resources (DNR), I will perform the tasks set forth in my assignment description and abide by the same rules and regulations applicable to the conduct of state employees, to the best of my ability. Further, I understand that my signature below is authorization for the Michigan DNR to conduct a criminal history check as part of the screening process.

Volunteer Signature (if minor, signature of parent or guardian)_____
Date**DNR USE ONLY**

Project Assigned to Name of Project and Location