



# Dickinson County Nature Center

2279 170<sup>th</sup> St.  
Okoboji, IA 51355  
(712) 336-6352

www.dickinsoncountynaturecenter.com



## VOLUNTEER INFORMATION SHEET

NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

SUMMER ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

WINTER ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home): \_\_\_\_\_ PHONE (cell): \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **RELATIONSHIP:** \_\_\_\_\_

Please list any medications and/or physical limitations of which we should be aware:

\_\_\_\_\_  
\_\_\_\_\_

### EDUCATION OR COMPARABLE EXPERIENCE

Major areas of study: \_\_\_\_\_

Other areas of interest: \_\_\_\_\_

### WORK OR VOLUNTEERING EXPERIENCE

Current or previous relevant experience: \_\_\_\_\_

\_\_\_\_\_

### SCHEDULING

Please circle what days and times you would generally be available for volunteering, meetings, and training:

SUNDAY	AM	PM	EVE
MONDAY	AM	PM	EVE
TUESDAY	AM	PM	EVE
WEDNESDAY	AM	PM	EVE
THURSDAY	AM	PM	EVE
FRIDAY	AM	PM	EVE
SATURDAY	AM	PM	EVE

Please circle: Summer Winter Year-round Special events only

**TURN PAGE OVER FOR MORE QUESTIONS →**

**ABUSE REGISTRY AND CRIMINAL HISTORY WAIVER**

Yes No

Do you have any charges pending in any state for a felony or any other crime for which the court could sentence you to imprisonment for more than one year? If yes, please explain: \_\_\_\_\_

Have you ever been convicted in any court of a felony or any other crime involving a firearm or explosives for which the court could have sentenced you to imprisonment for more than one year, even if you received a shorter sentence, including probation? If yes, please explain: \_\_\_\_\_

Are you a fugitive from justice (outstanding warrants?)

Are you an unlawful user of, or addicted to, any controlled substances?

Have you ever been adjudicated mentally defective or have you ever been committed to a mental institution? If yes, please explain: \_\_\_\_\_

Are you subject to a court order restraining you from harassing, stalking or threatening your child or an intimate partner or child of such a partner? If yes, please explain: \_\_\_\_\_

Have you ever been convicted in any court of a misdemeanor crime of domestic violence? If yes, please explain: \_\_\_\_\_

Are you listed on the state sexual offender registry? If yes, please explain: \_\_\_\_\_

I hereby give permission for Dickinson County Conservation to conduct a child and/or dependent adult abuse check and an Iowa criminal history check with the Division of Criminal Investigation. Any information maintained by the DCI may be released and I understand that it will be used by the requestor only for volunteer purposes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SPECIAL SKILLS**

Please circle any special skills you have:

Acting	Fundraising	Musical instrument: ____
Animal care	Gardening	Public speaking
Art	Graphic design	Sewing/needlework
Bicycling	Hiking	Storytelling
Canoeing/Kayaking	Historical knowledge	Taxidermy
Carpentry	Library	Woodcarving
Conservation/Restoration	Nature	Writing
Cross-country skiing	Office skills/data entry	Bilingual: _____

Do you have any other relevant skills not revealed by the above question? If so, please specify:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Do we have your consent to use your name and/or picture for volunteer recognition?

Name

Picture

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Thank you for offering to lend your time and talent!**