



# Adult Volunteer Application

Please complete pages 1-3 and attach completed clearances. Please mail to P.O. Box 3268 Erie, PA 16508. If you have any questions call the Education Department at (814) 864-4091 ext. 230 or e-mail [khaslett@eriezoo.org](mailto:khaslett@eriezoo.org).

**Adults include all applicants ages 18 and up for this program.**

## Personal Information

Name: \_\_\_\_\_ Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Best time to call: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ E-mail address: \_\_\_\_\_

Are you a returning volunteer? YES  NO

Are you currently employed? YES  NO  Retired  Name of employer: \_\_\_\_\_

Describe your primary responsibilities: \_\_\_\_\_

Are you currently a student? YES  NO  List School: \_\_\_\_\_

List last grade you completed: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_(optional)

Are you 18 years or older? YES  NO

Do you have court mandated service hours? YES  NO

Have you ever been convicted of a felony: YES  NO

**(The Erie Zoo cannot accept volunteers that have court mandated service requirements or who cannot obtain a clear background check)**

What special skills, talents, interests, training or hobbies do you have? \_\_\_\_\_

\_\_\_\_\_

Please list any previous volunteer experience: \_\_\_\_\_

\_\_\_\_\_

How did you hear about the Erie Zoological Society volunteer program? \_\_\_\_\_

## Photo Release

I hereby freely grant the Erie Zoological Society permission to publish photographs or videotape taken of me for editorial, advertising, on-line or commercial purposes.

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

Parent or Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Adult Volunteer Opportunities

The Erie Zoo Adult Volunteers have the opportunity to assist with Special Events, Children's Zoo Yards, Classes, Camps, Birthday Parties, Informational Stations, Animal Diets, Horticulture and other program preparations. We have on-ground and off-ground opportunities. Please be aware that animal handling is earned after a substantial commitment and review from Education Department. Volunteers will use our online scheduling system to pick what they would like to volunteer for and the times they are available. The minimum requirement of hours for volunteers is 40 hours a year. Most adults find this requirement easy to accomplish while working around their own personal schedules.

## References

List two personal or professional references that are not related to you:

1. Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_



## Erie Zoological Society Volunteer Program

### Medical Information

Before you begin your first volunteer assignment, we need you to provide the following medical information. Please sign your name and provide the original to the Education Department, by mail to P.O. Box 3268 Erie, PA 16508.

### Personal Information

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

Volunteer Name: \_\_\_\_\_

Name of emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### Medical History

Heart problems

Diabetes

Epilepsy

Allergies

Describe allergies and/or medical history we should be aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I am currently taking medicine for: \_\_\_\_\_

Restrictions on my physical activity include: \_\_\_\_\_

In case of emergency which hospital would you like to go to \_\_\_\_\_

Date of Tetanus Vaccination: \_\_\_\_\_

### Medical Insurance

Claims must be submitted to any other applicable insurance plan first (such as the insured's or parent's own personal medical plan), before being submitted to the Erie Zoological Society policy. However, if there is no other applicable insurance the Erie Zoological Society's policy will pay claims on a primary basis. All claims are based upon pre-approved volunteer activities.

Are you covered under medical insurance? YES  NO

Policy Holder Name: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

## Adult Volunteer Application

Please complete the entire Volunteer Application and processed clearances (Erie Zoo does not process or pay for your clearances). Applications that do not include the listed clearances will not be considered.

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If you have any questions call the Education Office at (814) 864-4091 ext. 230 or e-mail at [khaslett@eriezoo.org](mailto:khaslett@eriezoo.org).

Checklist to submit completed Volunteer Application:

- Application filled out with your Emergency Contact/ Insurance information and your clearances.
- The Erie Zoo does not process/submit clearances for you or pay for your clearances. Your clearances must be renewed every 5 years, if you continue to be a volunteer at the zoo. If you already have current clearances, less than 1 year old, you may send in copies of those with your application.
  - Go online to the sites listed below to get your Volunteer clearances (remember to print out your clearances.)
    - Your processed PA Child Abuse Clearance (a printed copy)  
[www.compass.state.pa.us/cwis](http://www.compass.state.pa.us/cwis)
    - Your processed Criminal Background Clearance (a printed copy)  
<https://epatch.state.pa.us>
    - Your processed FBI Fingerprint check (a printed copy) is required if you have not been a resident of the state of PA for at least the last ten years  
<https://www.identogo.com/>

Clearances: PA Law (PA Act 153) requires all of our volunteers (aged 18 years of age and older) to have completed background checks prior to volunteering at the Erie Zoo. Clearances required: Criminal History Background Check obtained from the PA State Police (PATCH); PA. Child Abuse History Clearance obtained through the Department of Public Welfare; and an FBI Fingerprint screening if you have not lived in Pennsylvania for at least the last ten years.