

TILDEN NATURE AREA - DOCENT APPLICATION

Name:	Today's date
Address:	Zip
Phone: Cell	Home
Email:	
Birthdate:	Pronouns
l) Education and Training – Indicate high	est level completed, subject area and any degrees or certificates
2) Experience – summarize employment church groups, sports, theater, etc)	(volunteer and paid) and participation in community activities (scouts,
3) Tell us about your hobbies, skills or sp	pecial interests (i.e. gardening, experience with animals, etc.)
4) List your experience working with chil	ldren, seniors, or special needs groups
5) Why do you want to volunteer at Tild	len Nature Area?



Which of the following docent and volunteer activities interest you. Check all that apply:

Farm Education	Aquatic Habitat Studies	Ohlone Culture
Park Information Stations	Working in the Butter	fly & Vegetable Gardens
Projects*		
*Please indicate something the program material prep, resea	• •	e included, but are not limited to, digital scanning
7) Please list the days of the	week and times you are generally a	vailable to volunteer:
8) How many hours a month	would you like to volunteer?	
9) Do you have proficiency in	a language other than English? Yes	s No
If yes, what language?		
	icted of a felony or misdemeanor, f	or entered a guilty or nolo contendere plea? Yes
11. All docents are required	to be fingerprinted. These fingerpri	nts will be kept confidential.
Do you agree to be f	ingerprinted? Yes	No
-	se provide information concerning will be made upon request. All info	any special accommodations you may need. ormation will be kept confidential.
I3. Please list two references	and their contact information (one	e personal and one professional):
I)		
2)		

PLEASE RETURN COMPLETED APPLICATION TO MFowlks@ebparks.org