



## Stella maris Environmental Research REGULAR SERVICE VOLUNTEER (RSV) APPLICATION

INT  RSV

DATE:

SMER DIVISION/OFFICE/PROGRAM:

**SECTION A- Background Information: (To be completed by Volunteer)**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

County: \_\_\_\_\_ Telephone: ( ) - (home) ( ) - (other)

E-mail\*: \_\_\_\_\_  Please e-mail me with volunteer news and information

Availability for volunteering:  Morning  Afternoon  Evening  Weekends

Emergency contact name:

Emergency contact relationship to you:

Emergency contact phone number: ( ) - (home) ( ) - (mobile)

Are you willing to travel?  YES  NO If yes, what county or region?

**PLEASE PLACE AN "X" NEXT TO THE BOX TO MARK YOUR (E) PREVIOUS EXPERIENCE AND/OR (I) INTEREST:**

E	I		E	I		E	I		E	I	
<input type="checkbox"/>	<input type="checkbox"/>	Conservation Education	<input type="checkbox"/>	<input type="checkbox"/>	Photography	<input type="checkbox"/>	<input type="checkbox"/>	Trail Development/ Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	Wildlife monitoring/research
<input type="checkbox"/>	<input type="checkbox"/>	Environmental interpretation	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer management	<input type="checkbox"/>	<input type="checkbox"/>	Operating ATV	<input type="checkbox"/>	<input type="checkbox"/>	Plant / tree identification
<input type="checkbox"/>	<input type="checkbox"/>	Working with youth	<input type="checkbox"/>	<input type="checkbox"/>	Event planning	<input type="checkbox"/>	<input type="checkbox"/>	Archery	<input type="checkbox"/>	<input type="checkbox"/>	Tree planting
<input type="checkbox"/>	<input type="checkbox"/>	Computer applications	<input type="checkbox"/>	<input type="checkbox"/>	Design/ illustration	<input type="checkbox"/>	<input type="checkbox"/>	Permitting	<input type="checkbox"/>	<input type="checkbox"/>	Gardening/ landscaping
<input type="checkbox"/>	<input type="checkbox"/>	Graphic/visual arts	<input type="checkbox"/>	<input type="checkbox"/>	Research	<input type="checkbox"/>	<input type="checkbox"/>	Hunting	<input type="checkbox"/>	<input type="checkbox"/>	Invasive plant removal
<input type="checkbox"/>	<input type="checkbox"/>	Festivals/public outreach	<input type="checkbox"/>	<input type="checkbox"/>	Carpentry/ woodworking	<input type="checkbox"/>	<input type="checkbox"/>	Fishing	<input type="checkbox"/>	<input type="checkbox"/>	Prescribed burning
<input type="checkbox"/>	<input type="checkbox"/>	Office/clerical	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	Birding	<input type="checkbox"/>	<input type="checkbox"/>	First Aid/CPR
<input type="checkbox"/>	<input type="checkbox"/>	Data Entry	<input type="checkbox"/>	<input type="checkbox"/>	Sea Turtles	<input type="checkbox"/>	<input type="checkbox"/>	Paddling	<input type="checkbox"/>	<input type="checkbox"/>	GPS/GIS
<input type="checkbox"/>	<input type="checkbox"/>	Writing/editing	<input type="checkbox"/>	<input type="checkbox"/>	Clean-up events	<input type="checkbox"/>	<input type="checkbox"/>	Boating	<input type="checkbox"/>	<input type="checkbox"/>	Other:

**KNOWLEDGE / SKILLS / ABILITIES (KSAs)**

List KSAs you possess and believe relevant to the position you seek, such as operating heavy equipment, computer skills, fluency in language(s), etc.

<b>BACKGROUND INFORMATION</b>		
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST-DEGREE MISDEMEANOR?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If "YES", what charges:		
Where convicted?	Date of Conviction:	
<b>Please note: Any volunteer working with or around children will have a background screening conducted.</b>		
<b>SECTION B- Job Tasks &amp; Training Needed (To be completed with Program Coordinator)</b>		
<b>Job Tasks:</b>		
<b>Special Training Needed:</b>		
<b>All volunteers please read and sign below:</b>		
<p>I offer and agree to volunteer my services to assist Stella Maris Environmental Research (SMER) in accordance with the understanding that I am not an employee and not subject to any provision of law related to state employment except as provided in 110.504, Florida Statutes. I also understand while performing volunteer activities I will be covered by state liability protection under 440.02, Florida Statutes. I hereby give my permission for SMER to obtain information relating to my criminal history record should my responsibilities include working with children. I also understand that as long as I remain a volunteer, the criminal history records check may be repeated at any time. I am at least 18 years old (or if I am younger than 18 my parent will consent to this agreement by signing below). I certify that my driver's license or driving permit is valid and in good standing from the state or country from which it is issued. If I have limitations that may prevent me from performing volunteer work, these limitations will be discussed with the volunteer team leader for work assignments to avoid personal injury. If I am injured while performing volunteer work, I will contact my team leader or the SMER supervisor for treatment information. I give permission to SMER to use any photographs taken of me for promotional purposes of the SMER volunteer program.</p>		
<p>* Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are considered public records and are available to the public and the media upon request. Therefore, your e-mail communications may be subject to public disclosure.</p>		
Volunteer Signature	Date	
Signature of Parent or Guardian (if Volunteer is under 18)	Date	
Volunteer Coordinator/Supervisor Signature	Date	