



**IFAW MARINE MAMMAL RESCUE & RESEARCH
FIELD VOLUNTEER APPLICATION**

Date: _____

PERSONAL INFORMATION:

Last Name: _____ First Name: _____ M.I. _____

Local Address: _____
(Street Address) (City) (Zip code)

Mailing Address: _____
(If Different) (Street Address/PO Box) (City/State) (Zip Code)

Primary Phone: _____ Work Cell Home

Secondary Phone: _____ Work Cell Home

Email address: _____ Date of Birth: _____

Do you have reliable transportation? Yes No
Do you have a valid MA driver's license? Yes No

Are you a permanent resident of Cape Cod or Southeast MA? Yes No
If not, when are you here? Weekends Summers Intermittently

General Availability: (Please check the timeframes for which you are generally available. This will aid in planning but is not a commitment from you.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM (8 to 1)							
PM (12 - 5)							

Other restrictions or information about your availability:

EMPLOYMENT INFORMATION:

Name of Current Employer: _____ Location (town): _____

Can you leave work for stranding response? Yes No
If yes, what is the best way to contact you there? _____

Employees of IFAW volunteer organizations please indicate your affiliation:
ACC ARL BPZ PCCS HSUS
NEAq NMLC WDCS WHOI IFAW

RELEVANT WORK OR VOLUNTEER EXPERIENCE:

Name of Company: _____ Title: _____
Dates of Experience: _____ Supervisor: _____ Phone: _____
Duties: _____

(CONTINUED ON BACK)

RELEVANT EXPERIENCE: (cont)

Name of Company: _____ Title: _____
Dates of Experience: _____ Supervisor: _____ Phone: _____
Duties: _____

PROFESSIONAL REFERENCE: (employer or supervisor preferred)

Name/Title: _____ **Phone:** _____

Business Name/Address: _____

SPECIAL SKILLS:

- | | |
|--|---|
| <input type="checkbox"/> Veterinarian/veterinary technician | <input type="checkbox"/> Administrative |
| <input type="checkbox"/> Certified diver | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> Marine biologist | <input type="checkbox"/> Public speaking |
| <input type="checkbox"/> Medical training | <input type="checkbox"/> Trailer or heavy machinery operation |
| <input type="checkbox"/> Wildlife rehabilitation | <input type="checkbox"/> Computer skills |
| <input type="checkbox"/> Animal Control or Natural Resources | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Other: _____ | |

MORE ABOUT YOU:

How did you learn about IFAW? _____

Please tell us in your own words why you would like to be a IFAW volunteer:

Do you have any special equipment you would be willing to use for stranding purposes?

- Dry Suit Wet Suit Dog Kennel Pick up Truck with Cap / SUV GPS unit
 Digital Camera 4X4 Vehicle Other _____

What Volunteer Opportunities and/or Programs interest you? (see Volunteer Program Info. sheet for descriptions)

Check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> Office Work | <input type="checkbox"/> Public Education and Outreach Program |
| <input type="checkbox"/> Fundraising/Event Planning | <input type="checkbox"/> On-Call Stranding Support Program |
| <input type="checkbox"/> Necropsy (animal autopsy) | <input type="checkbox"/> Office Intern Program |

TRAINING FEES

In order to defray the cost of the volunteer program there is a small initial training fee. The fees help pay for training sessions, volunteer ID cards, mailings, training manuals, marine mammal ID guides, etc.

Initial (All New Volunteers) \$25 (with hat or t-shirt)

**** Do not include payment at this time. Training fees are payable at your initial training session.**

Signature: _____ Date: _____

- After you submit your application for review (to the address at the bottom of this page), IFAW staff will notify you of the status of your application. If you are accepted, you must then attend one of our biannual Stranded Marine Mammal Response Team training sessions. A Level A Data Collection training must also be attended within your first year of volunteering.
- Upon completion of the initial training session, you must also read and sign the "Release from Liability" form to become an active volunteer.
- If any of the contact information you have provided on this application changes, it is your responsibility to contact IFAW with the updated information.

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