



VOLUNTEER APPLICATION

By authority of the Michigan Department of Natural Resources, completion is required for volunteer assignment consideration.

The State of Michigan, as an Equal Opportunity Institution, complies with federal and state laws prohibiting discrimination and harassment, including Title IV and Title VII (with amendments) of the 1964 Civil Rights Act, Title IX of the Educational Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, Veterans Readjustment Act of 1974 as amended 38 USC 20.

To be completed by Organization/Group/Individual Group or Organization Name(if any) Group/Organization Telephone Number of Individuals Brief Organization Description Volunteer Name (Last, First, MI) Parent/Guardian/Group Leader E-Mail Address Street Address Drivers License Number Date of Birth City, State, ZIP Volunteer Telephone (from 8 a.m. – 5 p.m.) **Emergency Contact Telephone Emergency Contact and Relationship** I am available ☐Year-Round Only during the following (*Example: from April to July, etc.*) Ending (mm/dd/yyyy): Beginning (mm/dd/yyyy): Days/Times most convenient for you From (Example: from 9:30 a.m. to 2 p.m.) Max. Time Commitment (hours) □Weekdays □Weekends Do you have a vehicle and/or equipment you are licensed to operate and are willing to use in your volunteer assignment? □Yes Are you interested in donating project materials, money, etc., for DNR volunteer projects? □Yes No If Yes, please describe donation How did you learn about DNR volunteer opportunities? □ News Media □ DNR Employee □ Other (Explain) What type(s) of Volunteer work are you willing and able to do? Why do you want to volunteer? **CERTIFICATION** I certify that, by accepting an assignment as a Volunteer with the Michigan Department of Natural Resources (DNR), I will perform the tasks set forth in my assignment description and abide by the same rules and regulations applicable to the conduct of state employees, to the best of my ability. Further, I understand that my signature below is authorization for the Michigan DNR to conduct a criminal history check as part of the screening process. Volunteer Signature (if minor, signature of parent or guardian) Date **DNR USE ONLY** Project Assigned to Name of Project and Location