**VOLUNTEER APPLICATION**

 **Training Host Site:** Adkins Arboretum, in partnership with ShoreRivers, Pickering Creek Audubon Center, and Phillips Wharf Environmental Center

 **Host Site Address:** Adkins Arboretum
12610 Eveland Rd., Ridgely, MD 21660

 **Dates:** Third Thursday of the month, March–December 2023

 **Program Facilitator:** Jenny Houghton, Assistant Director,
 Adkins Arboretum

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| ***Please type or print. Send completed application to Jenny Houghton at*** ***jhoughton@adkinsarboretum.org******.***  |
| **Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **First Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Street Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_\_\_\_\_\_ **ZIP:** \_\_\_\_\_\_\_\_\_\_ **County:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Phone: days:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **evenings:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **cell:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **County of Residence:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Occupation, if employed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Former occupation, if retired:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Emergency Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**For the following questions, please use additional pages as necessary.**

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| **1. List any training or experience in environmental education, research, stewardship, or related areas. In what area(s), if any, do you specialize (e.g., native plants, forestry, management, etc.)?** |
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| **2. Why do you wish to take Master Naturalist training?** |
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| **3. How do you plan to use the training you receive? What types of volunteer projects would interest you?** |
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| **4. How did you learn about the Master Naturalist program?** |
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| **5. Master Naturalist activities span a broad range of community service. If you are selected as a Master Naturalist trainee, will you be able to complete your 40 hours of volunteer service within one year of the last day of your volunteer training?** |
| **❑ Yes ❑ No (please explain)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **6. Rate your experience in the following areas: 1 = experienced 2 = some knowledge 3 = none** |
| Forestry Management | Birds | Soils |
| Wetlands | Amphibians/Reptiles | Ecology |
| Chesapeake Bay | Insects | Interpretation/Teaching |
| Lakes/Ponds | Mammals | Rivers/Streams |
| Plants/Trees | Natives/Invasives |  |
| **7. Please list any special skills (graphic or software design, website maintenance, data entry, editorial, marketing, art, writing, photography, lesson plan development, etc.) that may be useful to the Master Naturalist program.** |
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| **8. List skills, interests, and hobbies other than those listed for question 7.** |
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| **9. List organizations or clubs in which you are active.** |
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| **10. Please list languages, other than English, in which you are fluent.** |
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| **11. Which group(s) do you feel comfortable working with?** |
| **❑** Youth **❑** Young Adults **❑** Adults **❑** Seniors |
| **12. What kinds of volunteer projects would be the *least* comfortable for you to do?** |
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| **13. Classroom materials will be posted on our website. Do you have internet access? If not is there someone who can assist you?** |
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**Work Experience (list most recent experience first)**

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| **EMPLOYER** | **POSITION/TITLE** | **# OF YEARS** |
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 **Background**

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| **Do you have special needs that we would need to plan for?** |
| **❑** No **❑** Yes (please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Have you ever been convicted of, pled nolo contender (no contest to), or received a deferred or suspended sentence for a crime more serious than a parking or speeding offense in this or any other state, territory, or country?** |
| **❑** No **❑** Yes (please provide date, nature of offense, and disposition) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

*(A criminal record will not necessarily prevent an applicant from being a Maryland Master Naturalist; a criminal record will be considered as it relates to specifics of the volunteer position for which you are applying. Give all the facts so that a decision can be made.)*

**References**List three people who have definite knowledge of your character and skills. Do not list family members.

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| **NAME** | **PHONE** | **EMAIL** |
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*I authorize the Maryland Master Naturalist Program Facilitator to request and receive any background information about or concerning me, including, but not limited to, my Criminal History. I also authorize the Maryland Master Naturalist Program Facilitator to contact the listed references and to verify the information provided. I understand that misrepresentation or omission of facts requested is cause for non-appointment or dismissal as a volunteer. If appointed as a volunteer, I agree to abide by the philosophies and policies of the Host Site, as well as the Maryland Master Naturalist Program and to fulfill the volunteer responsibilities to the best of my ability.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.*