



Junior Naturalist Program Application

For New Applicants Only

Important! Applications **must** be filled out (*by hand*) by the **individual** applying for the position. If modifications to this policy are needed, please contact the Education Department to make arrangements.
(Please Print)

General Information

Name: _____ Goes By: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Parent's Work Phone: _____

Additional Phones: _____
(Number and Location/Type)

Email Address (Required): _____ Age: _____ Date of Birth: _____

Email Address of Guardian(s) (Required): _____

Names of Parents/Guardians: _____

Current Grade: _____ School(s): _____
(Current & Rising)

Contact in emergency: _____
(Name) (Phone)

(Address) (Relationship)

List any medication(s) you are currently taking: _____

Do you suffer from allergic reactions? Yes No If so, to what: _____

Do you have any special needs? _____ If so, please list so we may assist you _____

T-shirt size (adult sizes): _____

Can your family provide transportation to and from the Nature Center? Yes No

Personal Information

How did you hear about the Jr. Naturalist Program? _____

Have you ever volunteered anywhere before? Tell us about it. _____

Do you have a service hour requirement? How many hours are required? For whom? _____

Junior Naturalists often meet and greet visitors. Would you feel comfortable speaking in front of a group of people of various ages? Tell us about any experiences you have had speaking to groups.

Which of the two training sessions would work better for you? _____

What is your favorite subject in school and why? _____

What is your least favorite subject in school and why? _____

What do you do besides go to school – clubs, sports, scouts, etc.? _____

Of what accomplishments are you most proud? Why? _____

What are three words that describe you? _____

If you were an animal, what would it be and why? _____

Why do you want to participate in the Junior Naturalist Program and what do you hope to gain?

Availability & Scheduling Preferences

Please check the times you are usually available for a volunteer assignment. Mornings refers to the shift from 9:45 am to 1:15 pm and Afternoons from 1:00 pm to 4:30 pm. Please check **at least** one weekend shift. You will be assigned a specific team to work with throughout the summer. For instance, you may be placed on the Wednesday AM Team. If during a given week you have a family vacation, band camp, etc you may be able to switch with another participant. (This will all be explained in greater detail later) So only check off shifts that you will be able to attend regularly.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings
<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons

I would like to work with _____ because we plan to carpool.
 we are friends.

I will be able to substitute for sick participants on short notice. Yes No

If yes, does your parent/guardian grant permission to print your name and phone number on the contact list of substitutes for distribution to other program participants? Yes No

If yes, have parent/guardian sign here _____

Attach to this application, two letters of recommendation – one from a teacher and one from an adult who has known you for at least two years. Neither one may be written by a relative. Home-schooled applicants may substitute a teacher-written letter with one from a community member.

It is your responsibility to tell the author that each letter of recommendation must include:

- 1) The author’s name, signature, daytime phone number and the date written
- 2) The author’s relation to you
- 3) How long the author has known you
- 4) The author’s account of instances that have shown your ability to:
 - a. Follow through with commitments
 - b. Take initiative
 - c. Make responsible decisions
 - d. Act as a representative of a community facility committed to providing safety and enjoyment for visitors of all ages and quality care for animals

I understand that in signing this application:

- a. I have read the attached information, and I agree to be guided by the rules and regulations of the Western North Carolina Nature Center and the Jr. Naturalist Program.
- b. I affirm that the applicant has provided the information on this form and the information is true, correct and complete.

Applicant

Date

Parent/Guardian

Date

Please return all application materials (*four application pages, current photograph, two letters of recommendation, and permission sheet*) by **April 16th** to:

Daniel Clere
Jr. Naturalist Volunteer Coordinator
75 Gashes Creek Road
Asheville, NC 28805