

**VOLUNTEER  
PROFILE**

Directions:

- Please complete this page, even if résumé attached
- Type or print, using black ink or marker
- If you need additional space, attach a separate sheet
- Sign the completed application

**GENERAL**

NAME (LAST)	(FIRST)	(MIDDLE)	SOCIAL SECURITY NUMBER	TODAY'S DATE
PRESENT ADDRESS (STREET, CITY, STATE, ZIP CODE)			DAY PHONE WITH AREA CODE	EVENING PHONE WITH AREA CODE
ADDRESS WHERE YOU MAY BE CONTACTED IF DIFFERENT FROM PRESENT ADDRESS			ALTERNATE PHONE NO.	BIRTHDATE, IF UNDER 18
ARE YOU A STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES:	1) ARE YOUR VOLUNTEER ACTIVITIES PART OF A SCHOOL OR ANY OTHER FORMAL PROGRAM? <input type="checkbox"/> YES <input type="checkbox"/> NO		
		2) IF YOU ANSWERED "YES" TO QUESTION ONE, PROGRAM OR SCHOOL NAME:		
HAVE YOU EVER VOLUNTEERED FOR CORNELL? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, INDICATE DATES OF VOLUNTEER SERVICE	DEPARTMENT	POSITION	
HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENSE OTHER THAN MINOR TRAFFIC VIOLATIONS? _____ IF SO, PLEASE EXPLAIN. A CRIMINAL CONVICTION WILL BE CONSIDERED ONLY IN RELATION TO THE VOLUNTEER SERVICE FOR WHICH YOU ARE APPLYING. SERIOUSNESS AND NATURE OF OFFENSE, TIME ELAPSED, AND REHABILITATION WILL BE TAKEN INTO ACCOUNT.				
DATE AVAILABLE	APPROXIMATELY WHEN AND HOW MANY HOURS PER WEEK WOULD YOU LIKE TO VOLUNTEER?			
FROM	TO			

**EDUCATION AND TRAINING**

RELEVANT EDUCATION

RELEVANT TRAINING, SKILLS, EXPERIENCE

On the back, please describe your birding skills, your experience leading groups, and your reasons for wanting to volunteer at the Cornell Lab of Ornithology.

**CONTACTS**

Please list at least one person as an emergency contact.

NAME	MAILING ADDRESS	TELEPHONE NUMBER

Your email address:

I certify that all statements contained in this application are true. I also agree that if I am accepted as a volunteer, I will abide by all regulations of the university.

Date \_\_\_\_\_ Signature \_\_\_\_\_