

Volunteer Application (Age 18+)

Today's Date (Month, Date, Year): *			
Name: *	Gender		
First	Last		
Address: *			
Street	City	State	Zip Code
Home Phone: *	Mobile Phone:		
Area Code Phone		Area Code Phone Numb	er
E-mail: *	Your birthday (Month,	Date, Year): *	
Education/School/Major			
2 nd Language Proficiencies			
In a few words, please describe why you	are interested in volunteering at the	Cheyenne Botanio	Gardens?
Which area would you enjoy working th	ne most? (number 1-10, number 1 be	ing most enjoyab	le):
Conservatory Horticulture: picking up	plant debris, up-potting, sweeping, insec	t scouting, washing	plants, and
general cleanup.			
Greenhouse Horticulture: seeding, tak	king cuttings, transplanting, watering, wee	eding, mixing soil, a	nd general
cleanup.			
	ing, weeding, pruning, mowing, string tri	mming, raking, wate	ering, emptying
trash, and snow shoveling.			
Children's Village Gardening: weeding other seasonal tasks. Teaching, reading, and	s, watering, dead heading, seed sowing, massisting with classroom set up is also ava		weeping, and
	c, providing information about events, pr		ership, voluntee
opportunities and general information about	-	= =	o. op)
-	water features, hardscaping, building rep	=	ction projects,
assisting with living wall and installing memo	rial plaques.		
	doned plots, planting, weeding, turning c	ompost, cleaning ar	nd organizing
sheds, picking up trash and occasional water			
	ng, sweeping, mopping, emptying trash, as and maintenance to hardscapes (benche		
grounds Maintenance. general repairs buildings).	s and maintenance to nardscapes (bench	es, structures, wate	r reatures, out
	o work (Chack anal)? Marnings	Afternoons 🗌	Either 🗌
What part of the day would you prefer to	, ,		
Which days of the week would you prefe	er to volunteer? (Check a maximum of	f two days).	
Monday \square Tuesday \square Wednesday \square	Thursday \square Saturday \square Sunday	\square Any \square	
Would you agree to a background check	if it were necessary to volunteer? Yes	es 🗌 No 🗌	
Do you have your own transportation?	Yes □ No □		
	es \square No \square If "yes," please list	programs vou are	proficient in:
20 , canare comparer experience:	es = 110 = 1, yes, preuse not	p. Jg. a.m. you are	p. 0,10.0110 1111

Please list any previous volunteer experience (where, when, and what):
low did you find out about and/or become interested in volunteering at the Cheyenne Botanic Gardens?
Please list the best person to contact in case of an emergency (Please include phone number, address, and elationship)
Please list one references (feel free to list professors, employers, neighbors, friends etc.): Jame Reference: *
Phone of reference:
Briefly list any gardening experiences you may have:
Vhat does sustainability mean to you?
ome medications increase reactivity to the sun and plants. They may also affect balance. Please list any nedications which we should be aware of, so that we can assign appropriate volunteer activities that don't add isks to your health:
Volunteer Agreement, Waiver and Liability Release certify that the information given in this volunteer application is true and correct and has been given voluntarily. I inderstand that this information may be disclosed to any party with legal interest, and I release Cheyenne Botanic Gardens rom any liability whatsoever for supplying such information. Volunteer placement is a selective process and not all pplicants are accepted into the program. Cheyenne Botanic Garden reserves the right to place volunteers in an area best uited to the applicant's skills and the needs of the organization. No volunteer position is guaranteed, and positions may be erminated at the Gardens' sole discretion.
understand that I will not be paid for my services as a volunteer, and I will adhere to volunteer program guidelines stated the volunteer handbook.
ignatureDate
o not write below this line – office use only
Reviewed by: Provided with Manual: YesNo Vait Listed: Last contact: Orientation scheduled for: Database: YesNo