



## Volunteer Application

**Please print**

First Name.....Last Name.....

Address .....City/State/Zip.....

Telephone .....Social Security # .....

Date of Birth .....Drivers Lic. # .....

**Personal Information (please circle correct response):**

Gender:        Male            Female

**Physical Limitations:**    No    Yes (Please Explain)

**Education (highest level completed)**

Grades 1-5    6-9        11-12    College    Business    Graduate School Technical/Vocational

**Occupation** ..... **Most recent employer** .....

**List previous volunteer experience**.....

.....  
.....

**Skills (List your skills and indicate proficiency level)**    Skilled    Can Teach    Amateur

1. ....
2. ....
3. ....
4. ....
5. ....

**Volunteer availability: (Circle all applicable)**

Number of Days per week: 1 2 3 4 5

Monday    Tuesday    Wednesday    Thursday    Friday    No Preference

**Transportation: (How you will get to your assignment)**

Public Trans.    Walk    Bus/Van Taxi/Car Svc    Car

**In an emergency, notify:**

First Name.....Last Name.....

Address .....

City/State/Zip.....Telephone .....

Volunteers hereby agree to serve any client who is assigned regardless of race, gender, creed or national origin.

.....  
(Signature)

.....  
(Date)

Appointment to a Volunteer position with SOAR Illinois in no way guarantees Wildlife Rehabilitation or Falconry Sponsorship.