

## Florida Department of Environmental Protection Florida Park Service Volunteer Application



Date:		14 Tim		
Purpose for Volunteering	☐ Internship			
☐ Give back to the community	College educational requirement			
Campground host or resident volunteer	K-12 educational requirement			
Project for scouting or service group				
I am a: New Applicant Returning Volunteer				
Applicant Information (Please submit a separate application for each individual)				
Applicant Name (Last name, first name, middle initial)		Telephone (Best)		
Address				
City State Zip C	ode	Date of Birth (DOB)		
Davis have a valid Driver License 2 D Vac D Na				
Do you have a valid Driver License? Yes No	Email Address			
(Required for some duties)				
Emergency Contact Information	D 1 (1 1 1 1	I <del>-</del>		
Name	Relationship	Telephone (Best)		
References (List references that are familiar with you		perience. Do not include relatives.)		
Name	Telephone(s):			
Name	Telephone(s):			
	10.001.000			
Name	Telephone(s):			
Locations in which you are most interested	in volunteering (F	Florida State Parks)		
1. 2.		3.		
Are you willing to consider volunteering at other Florida	State Parks?	□ No		
Availability				
Year you are applying for: How many hours per week ca				
Check-off the month(s), day(s) of the week and time you		you volunteer?		
Jan Feb Mar Apr May Jun Jul Aug Sep	Oct Nov Dec	Less than 10 10 to 20		
Sun Mon Tue Wed Thu Fri Sat	AM PM	20-30 30-40		
Is your availability flexible? Yes No				
Campground Host or Resident Volunteer (Note: Maximum 16-week stay in any single park.)				
Complete this section only if you are applying to be a Campground Host or Resident Volunteer.  Type of camping unit:  Motor Home  5th Wheel  Trailer/Camper  Tent				
Length or width of unit (including slide out): L W Extra Vehicle? ☐ Yes ☐ No				
RV minimum hook-up necessary:   Water   Sewer   Electricity Amps Needed:				
Will you have a pet?   Yes No If yes, type and breed:				
Number of people (including applicant) that will be residing at the campsite: Adults Youths				
Name(s) of others residing with you:  DOB:				
lame: DOB:				
lame: DOB:				

## Highlight background and experiences that you feel contributes to the Florida State Parks. Education, Knowledge, Skills, Abilities:

Education, Knowledge, Skills	, Abilities:			
Experience: (Please include a	ny previous campground hostir	ng or volunteer experience	, listing the locatio	n and dates)
License, Registration or Cert	ification:			
Habber and Internation				
Hobbies and Interests:				
Your Volunteer Service Goals	 S:			
Are you willing to supervise	other volunteers? 🗌 Yes 📋	No		
Please check all of the boxes o		-		e indicate (circle
or select) whether you have eitl			_	
☐ Toll Collection <b>E</b> / <b>I</b>	Office/Clerical E / I	☐ Housekeeping <b>E</b> / <b>I</b>		d. Maint. <b>E</b> / <b>I</b>
Store Operations E / I	Graphic Design E / I	Painting E / I		scaping E / I
☐ Museum/Living History <b>E</b> / <b>I</b>	<del></del>	☐ Carpentry/Constr. E / I	_	enance E / I
Tour Guide/Intrepret <b>E</b> / I	☐ Fundraising <b>E</b> / <b>I</b>	☐ Electrical <b>E</b> / <b>I</b>	☐ Small Engine	•
Special Events <b>E</b> / <b>I</b>	Resource Mgmt. E / I	☐ Plumbing <b>E</b> / <b>I</b>		ment Repair <b>E</b> / <b>I</b>
Other (Please specify <b>E</b> / <b>I</b> )	<u> </u>			
Background Information		,	□ Voc	s 🗆 No
Have you ever been asked to			∐ Yes □ Yes	_
Have you ever been convicte	•		_	, 140
Have you ever pled Nolo Contendere or pled guilty to a crime which is a felony or a first degree misdemeanor? ☐ Yes ☐ No				
Have you ever had the adjudi	cation of guilt withheld for a	crime which is a felony		
or a first degree misdemeand	r?	-	☐ Yes	s 🗌 No
If 'yes' to any of the question	s, please explain, what charç	ges or convictions and w	here?	
			_	
<b>Note</b> : A "Yes" answer to these severity and date of the offense	•		•	
Department of Environmental F	•			
positions of special trust as des			•	
fingerprinting as a condition of				
I understand that I may be asked	•	` ,	•	
identfication, and social security application is true and correct. I	• •			•d
apphoation is true and correct. I	araior, i admonze me i ionda	Clate I alike to veilly tile III	normation provide	· <b>u.</b>
		_		
Volunteer's Signature			Date	



## Florida Department of Environmental Protection Florida Park Service Volunteer Agreement



As a volunteer for the Florida Departr	ment of Environmental Protection, Florida Park Service (FPS), at State Park ( <i>print name</i> )
	(print name), agree to abide by all applicable FPS rules, policies, I acknowledge it is my responsibility to become familiar with the contents Handbook. A copy may be provided by the park and can be found online
Volunteer Agreement Standards	
agree to:	
<ol> <li>Present a professional park in Operations Manual, and I agree</li> </ol>	policies when communicating with the public, staff, and fellow volunteers. nage and follow all FPS uniform requirements as outlined in the ee to purchase uniform items as assigned or required by my position.
courteous and supportive attit	er service and professionalism at all times, to include maintaining a ude.
4. Only participate in approved a	assignments and duties as outlined in my position description. PS trainings as well as those required for my position.
6. Make a good faith effort to res	solve differences and problems and refrain from malicious talk, negative ents regarding fellow volunteers, staff or the FPS.
	n to secure special privileges, benefits, personal business, or exemptions
state property (including unifo 9. Implement all FPS safety stan 10. Report volunteer hours and of	ice space, and vehicles as assigned to me for my position, and return all rms, ID cards, passes, etc) issued to me at the end of my service. Indards and report job-related injuries immediately to supervisory staff. Ither information as required by my supervisor.  In and policies that I do not understand.
12. If a resident volunteer, I under I understand that I may only re	rstand that I am required to volunteer a minimum of hours per week. eside in any single state park for a maximum of 16-weeks during a fiscal (date) to (date).
protection (Section 768.28, F.S.) and collective bargaining agreements appunderstand my service can be termin or without cause, and I do not have the contract of the contract	employees of the State of Florida. Volunteers are covered by state liability by workers' compensation (Chapter 440, F.S.). No other benefits of oly. I understand my volunteer performance will be evaluated. I also ated by the FPS, or I can terminate my volunteer status, at any time, with ne right to grieve or appeal. I understand that volunteers on duty for the videoed and the materials may be used to promote the Department. No
Volunteer's Signature	Supervisor's Signature / Park  *Agreement must be renewed annually.
Date*	Date *
	es, policies, and standards governing volunteers and do hereby grant (name of applicant), date of birth, to
Signature of Parent / Guardian	 Date

The mission of the Florida Park Service is to provide resource-based recreation while preserving, interpreting and restoring natural and cultural resources.