



Boise Parks & Recreation
and Friends of Zoo Boise

ZooTeen

Application
Summer 2010

PROGRAM INFORMATION

Thank you for your interest in volunteering at Zoo Boise! If accepted as a ZooTeen, you will gain experience with teaching, leadership, public speaking, animal care, and learn about animals and the wild places they inhabit! Please read all of the following information before completing your application.

1. The youth volunteer program is for youth ages 13 (entering 8th grade) to 18 (entering 12th grade). Applicants must be at least 13 years of age by September 1, 2010 and have completed 7th grade (no exceptions).
2. ZooTeens focus on conservation education for Zoo Boise visitors by assisting with summer camps for children, providing informal educational presentations for zoo visitors (using artifacts and live animals), providing daily care for the education animals, and helping with daily maintenance of the Simplot Education Center. It is recommended that ZooTeens assist with one full week of summer camp. A minimum of 40 hours per summer is required.
3. Thirty to fifty individuals will be accepted into the program based on the application and an interview.
4. If selected, the applicant is expected to:
 - participate in all aspects of the program.
 - attend all training sessions (see “What Happens After You Apply” below).
 - pay a \$25.00 fee to cover costs of a volunteer manual and Zoo Boise Volunteer shirt.
 - wear the Zoo Boise Volunteer uniform - shirt (provided by the zoo through a program fee) and khaki pants or shorts (no shorter than mid- thigh) that is provided by you. Closed-toe and closed-heel shoes are required—no sandals or flip-flops.
 - work at least one half-day shift (8am-12noon and 1pm-5pm) each week during the summer months of June, July, and August (total of 40 hours after training).
 - get updated on tetanus shots (see “Medical Information and Release” on the application.)
 - submit a negative TB test at own expense.

HOW TO APPLY:

1. Complete the Application and Additional Questions by yourself.
2. Submit a reference. Ask a teacher, coach, club leader, counselor, or employer (not a relative or neighbor) to complete the enclosed form. Give them as much time as possible. It will help if you attach a stamped envelope addressed to Friends of Zoo Boise - Education/Zoo Teen Program.

3. Have your Parents/Guardians complete the City of Boise Individual Volunteer Waiver.
4. Send or personally deliver the completed application to Friends of Zoo Boise-Education/ZooTeen Program by (or postmarked by) April 1. Applications by email or fax will not be accepted. Applications received after the due date and time will not be considered.
5. Every part of the application is important. Take your time to pay attention to all details of the application including neatness. Follow up with the individuals chosen as your references.
6. You and a parent or guardian are required to attend one ZooTeen Preview Hour to learn more and ask questions about ZooTeens. Call 384-4260 ext 206 to register at least one day prior to the preview hour.

Wednesdays, 6-7 pm at Zoo Boise

March 10th or 17th or 24th

WHAT HAPPENS AFTER YOU APPLY:

1. Your application will be reviewed for neatness, thoroughness, and content.
2. Based on applications, it will be determined who will be granted an interview. If your application does not meet standards for an interview, you will be contacted. Interviews will take place in April, Tuesday through Friday, between 3pm and 5pm.
3. After your interview, you will be contacted by letter (mailed May 1, 2010) or by phone regarding your acceptance into the ZooTeen Program.
4. If accepted, you will be required to attend **both** training sessions at Zoo Boise:

Thursday, June 10th, 2010 9:00 am – 4:30 pm

Friday, June 11th, 2010 9:00 am – 4:30 pm

A NOTE TO PARENTS & GUARDIANS Zoo Boise's ZooTeen Program provides a fun and educational activity for your teen. We make every effort to maintain a quality program which also requires assistance from you. We emphasize to the student that they are making a commitment to Zoo Boise and it requires your support for them to fulfill their obligation. We can only accept 30-40 students into the program from the many applications we receive. Please encourage your child to take the application and interview seriously as it will assist us in selecting the participants.

QUESTIONS? Please call 384-4260 ext 206

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**Boise Parks & Recreation and Friends of Zoo Boise
ZooTeen Program - Summer 2010**

For Zoo Boise use
only
Name _____
Rec'd _____
Age _____
Prev Y N

APPLICATION

Due by (postmarked by) April 1. Applications by email or fax not accepted.

Complete & return to:
Education/Youth Volunteer Program * Friends of Zoo Boise * 355 Julia Davis Drive * Boise, ID 83702
Phone (208) 384-4260 ext 206

Please Print or Type

Name _____

Home Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Gender M F Date of Birth _____

T-shirt size Adult (circle one) S M L XL XXL

School you will be attending next Fall _____ Year of Graduation _____

Name of Mother / Guardian _____

Home Address _____
(if different from above)

City _____ State _____ Zip _____

Phone _____ Work/cell phone _____ E-mail _____

Name of Father/Guardian _____

Home Address _____
(if different from above)

City _____ State _____ Zip _____

Phone _____ Work/cell phone _____ E-mail _____

ADDITIONAL QUESTIONS

To help us learn more about you, please answer the following questions YOURSELF. If you need more space, attach additional sheets. Please remember neatness!

1. What extra-curricular activities, hobbies, or sports do participate in? These activities can be school or non-school related.
2. Why do you wish to volunteer at Zoo Boise?
3. What is the purpose of a zoo?
4. Describe any other volunteer experiences you have had.
5. Describe any experience you have had working with children or teaching others.
6. Describe any experience you have with mammals, reptiles, or birds (including pets!).

Please consider me for the Youth Volunteer Program at Zoo Boise. If I am accepted, I will commit to the summer long program.

Applicant's Signature _____ Date_____

How did you hear about the Youth Volunteer Program? (circle one)

school announcement teacher/counselor parent friends website zoo volunteer

other_____

Medical Information and Release

In an emergency, if the parent or designated Physician/Doctor cannot be reached, I authorize Zoo Boise to transport and/or obtain medical services from any doctor (M.D. or D.O.) for my child.

Applicant's Name _____ Home Phone _____

Parent/Guardian Signature _____ Date _____

Phone (day) _____ Phone (evening) _____

Emergency Contact _____ Relationship _____
(other than above)

Phone (day) _____ Phone (evening) _____

Please indicate any medical conditions of which Zoo Boise should be aware of by circling any conditions that apply. *This information will be kept confidential but is needed in order to work effectively with your child. Failure to provide honest answers could result in your child's termination from the program.*

Allergies (please describe)

Bleeding disorder

Hearing impairment

Learning disability/impairment

Hyperactive

Migraine headaches

Vision impairment

Asthma

Diabetes

Heart condition

ADD or ADHD

Physical disabilities/restrictions (please explain)

Seizures

Other (please explain below)

Medications _____

Physician Name _____ Phone _____

Dentist Name _____ Phone _____

TUBERCULOSIS TEST- If accepted into the Zoo Teen program, teens will need to submit a negative TB test at own expense. Tests can be performed at Primary Health Clinics for \$13.00 - \$18.00. More information will be provided upon acceptance.

TETANUS INNOCULATIONS - Applicants should have had a tetanus inoculation within the last 10 years. We require that a Parent/Guardian confirm this inoculation by signing below. It is not necessary to send the applicant's health records.

Date of tetanus inoculation _____

Parent/Guardian Signature _____

Document Type: Exhibit
Number: 2.01q
Effective: 10-01-09
Revised:
Legal References:

INDIVIDUAL VOLUNTEER WAIVER

Name of Volunteer: _____ Email Address: _____

Address: _____ State: _____ Zip Code: _____

Home Phone: _____ Work/Mobile Phone: _____

Emergency Contact (Print Name): _____

Address: _____ Phone: _____

AGREEMENT BY VOLUNTEER:

I agree to volunteer my services to the City of Boise in accordance with the following understandings:

1. I will offer my services with no expectation of pay, benefits or other privileges of employment of any kind. I certify that I have not been promised and have no expectation that I will receive a paid position as a result of my volunteer work.
2. I understand that placement into volunteer positions are at the sole discretion of the City of Boise. Accordingly, my volunteer assignment/service may be withdrawn or terminated at any time.
3. My volunteer service will not confer on me the status of a City employee, while acting within the scope of this Agreement.
4. I certify that I have been given and have read the City of Boise Volunteer Handbook. I understand my job duties and the potential hazards/risks that are involved, if any, for this volunteer position. I understand it is my responsibility to be aware of my physical condition and I will not engage in physical activities that are beyond my capabilities. I will notify my volunteer coordinator/supervisor of any significant change in my ability to do the work. If special skills are required for this project, I acknowledge I have been appropriately informed of the required tasks.
5. If photographed, I grant the City of Boise permission to use my image in any and all publicity, advertising and promotional materials, including web site entries, media releases, pamphlets or any other legitimate uses that the City of Boise may deem proper without payment or any other consideration in perpetuity. I hereby authorize the City of Boise to edit, alter, copy, exhibit, publish or distribute this photo. I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my photo appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge the City of Boise from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.
6. If I drive a personal vehicle to and from a volunteer project, I certify that the vehicles are properly insured as required by Idaho State Law.
7. I understand and agree that the City is not responsible for any of my personal property that is lost, damaged or stolen while I am participating as a volunteer.
8. If the volunteer is under 18 years of age, a parent/guardian or supervising adult must sign this Agreement.

Volunteer Signature

Date

Parent/Guardian Signature (Required if under 18)

Date

Parent/Guardian Printed Name

Relationship to Volunteer



Zoo Boise use only

Name _____
Rec'd _____

Due by (postmarked by) April 1. Applications by email or fax not accepted.

Complete & return to:
Education/Youth Volunteer Program * Friends of Zoo Boise * 355 Julia Davis Drive * Boise, ID 83702
Phone (208) 384-4260 ext 206

For the Applicant

Put your name on the "Applicant's Name" line then give it to one teacher, coach, club leader, counselor, or employer (not a relative, neighbor, or friend). Make sure they have enough time to complete the reference and send it to Zoo Boise. Ask them to mail it as soon as possible since no application will be reviewed without a letter of reference. No more than one reference is necessary.

For the Adult Providing the Reference

The applicant below is applying to Zoo Boise's Youth Volunteer Program. This program is a summer program for teenagers entering 8th - 12th grade who have an interest in animals and the environment. The applicants we select should show a desire an ability to teach others and willingness to commit to the summer long program. The focus of the work is public education. Although the volunteers may be trained to handle some animals, the majority of their time will be spent interacting with Zoo Boise visitors.

We would appreciate your candid responses which will be kept confidential. Your comments will aid us in selecting a committed group of teen volunteers. Thank you for you valuable time and assistance. If you have any questions regarding the program, please call Zoo Boise Education at (208) 384-4260 ext 100.

Please Print

Applicant's Name _____ Date _____

Adult's Name _____

How long have you known the applicant? _____

In what capacity have you known him/her?

I recommend this applicant to Zoo Boise Youth Volunteer Program (circle one)

With great enthusiasm with confidence with some confidence with reservation

Please Evaluate the Applicant

Scale: U = unknown 1=below average 2 = fair 3 = average
 4 = good 5 = excellent 6 = outstanding

Oral Communication skills	U	1	2	3	4	5	6
Ability to analyze a problem	U	1	2	3	4	5	6
Leadership skills	U	1	2	3	4	5	6
Dependability	U	1	2	3	4	5	6
Sense of responsibility	U	1	2	3	4	5	6
Self motivation	U	1	2	3	4	5	6
Perseverance	U	1	2	3	4	5	6
Ability to work independently	U	1	2	3	4	5	6
Reaction to criticism	U	1	2	3	4	5	6
Regard for authority	U	1	2	3	4	5	6
Regard for the rules	U	1	2	3	4	5	6
Cooperation	U	1	2	3	4	5	6
Adaptability	U	1	2	3	4	5	6
Sense of feeling for others	U	1	2	3	4	5	6
Behavior in a group	U	1	2	3	4	5	6
Ability to follow directions	U	1	2	3	4	5	6

List any special interests, qualities, abilities or experiences of this applicant which would be helpful for this application.

Adult's Signature _____ Phone _____