



OFFICE USE ONLY		
	Date	Initials
Received	_____	_____
Interview	_____	_____
Bkgrd Check	_____	_____
Accepted	Yes	No

Docent Application

(Please completely fill out both sides of this application for consideration in the Docent Program)

Name _____ Birth Date (mm/dd/yy) _____
first middle last

Address _____ Home () _____

City _____ State _____ Zip _____ Work () _____

Email address _____ Cell () _____

Place of employment _____ Occupation _____

If retired, please list your former occupation _____

Educational background (please list any degrees received) _____

Docents are volunteer educators who present programs to various age groups both at the zoo and on outreaches in the greater Lansing area and beyond. Programs can take place inside or outside in all weather. Docents must be able to communicate effectively with diverse groups of people, be able to walk in the zoo for up to 1.5 hours, stand for 1 hour or more while doing presentations, carry equipment/cages weighing up to 20 lbs for short distances, follow specific written and oral directions, and learn new facts and concepts. Applicants accepted into the Docent Program must commit to serving a minimum of 50 hours per year for at least 2 years, be able to participate in a mandatory 7 week training course, and pass a background check.

I feel confident that I can meet the above requirements. (Please initial) _____

Potter Park Zoo is committed to diversity and will provide reasonable accommodation if necessary. Do you require accommodation to perform docent duties or fulfill the training and yearly commitments?

If yes, please explain _____

Why do you want to volunteer at Potter Park Zoo? _____

Have you ever volunteered before? If so, where did you volunteer and what were your duties?

Why do you feel you would be a good docent candidate? _____

Please list any teaching experience (include both formal and informal) _____

Please list any animal handling experience (including pets) _____

Do you have any animal allergies? Please be specific. _____

Availability: Place an X in each time slot you are generally available to volunteer.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning (before 12pm)							
Afternoon (after 12pm)							
Evening (after 5pm)							

References may be requested

I certify that the statements made in this application are true and correct and have been given voluntarily. I authorize verification of all information contained in this application and understand that references may be requested by the Education Department. I release previous employers or agencies for which I have performed volunteer work and Potter Park Zoological Society from any and all claims and liabilities of any nature arising from supplying and/or verifying such information. If the information provided in this document is found to be untruthful, I understand that I will be released from the docent/volunteer program. I understand that I will not be paid for my services as a volunteer/docent and that filling out an application does not guarantee acceptance into the docent program.

Signature _____ Date: _____

Please return to: Potter Park Zoo Attn: Docent Program 1301 S. Pennsylvania Ave, Lansing, MI 48912.
If you have any questions, contact the Education Department at 517-342-2713.