



# Alaska Wild Bird Rehabilitation Center

## Volunteer Interest

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Age: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Address: City, State, Zip Code \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

### Please indicate your areas of interest:

<input type="checkbox"/>	Rehabilitation (medical care)	<input type="checkbox"/>	Presentations & Events
<input type="checkbox"/>	Routine care of in-house birds	<input type="checkbox"/>	Office support
<input type="checkbox"/>	Construction and mew maintenance	<input type="checkbox"/>	Grant writing (experience preferred)
<input type="checkbox"/>	Raising wild baby birds (involves taking birds home and requires additional training)	<input type="checkbox"/>	Fundraising
		<input type="checkbox"/>	Social Media/Web support

### Special interests:

<input type="checkbox"/>	All birds	<input type="checkbox"/>	Owls
<input type="checkbox"/>	Eagles	<input type="checkbox"/>	Waterfowl
<input type="checkbox"/>	Hawks	<input type="checkbox"/>	Songbirds
<input type="checkbox"/>	Ravens & Jays	<input type="checkbox"/>	Environmental Impacts & Issues
<input type="checkbox"/>	Seabirds	<input type="checkbox"/>	

Do you have any experience working with the public? Explain: \_\_\_\_\_

Do you have any medical/veterinary training? Explain: \_\_\_\_\_

Have you worked with any types of domestic, exotic, or native wildbirds? \_\_\_\_\_

List any specialized bird courses you have taken: \_\_\_\_\_

**Additional Information:** Please share with us other information, such as, your educational background, volunteer experience, memberships in other organizations, special skills, etc..

Signature \_\_\_\_\_ Date \_\_\_\_\_

<Volunteer Coordinator contact \_\_\_\_\_ Date \_\_\_\_\_ >