



**Ecological Reserve
Warden**

**VOLUNTEER
APPLICATION**

Mail applications to:
BC Parks
PO Box 9398
Stn Prov Govt
Victoria BC V8W 9M9
Or email to:
ParkInfo@Victoria1.gov.bc.ca

| | |
|---|--------------------------------------|
| Applicant Name: _____ <i>last, first, middle</i> | Age: _____ <i>optional</i> |
| Address: _____ <i>Box or Street, include apartment number, if any</i> | Phone: (____) _____ |
| _____ | Fax: (____) _____ |
| <i>City, Province, Postal Code</i> | |
| Optional Seasonal Address (if applicable) | E-mail: _____ |
| _____ | |
| <i>Winter mailing address</i> | <i>Applicable Date</i> |

What expertise or experience would you bring as an Ecological Reserve Warden? (*Attach additional sheet if necessary*)

Availability: Please tell us when you are available for volunteer service.
Starting/Ending date (if known): _____
Days of week and working hours (rough estimate): _____

Location: In which Ecological Reserve would you most like to work?
(*Note: We will attempt to match your needs with BC Parks*)
First Choice: _____
(Ecological Reserve, Region)
Second Choice: _____
(Ecological Reserve, Region)
Third Choice: _____
(Ecological Reserve, Region)

Are you willing to work in any other Ecological Reserve/s? Yes _____ No _____
(*List protected areas and/or general location*)

Applicant's Occupation: _____

Retired

Relevant Employment History: *(Attach resume or additional sheet if necessary)*

Volunteer Experience:

Have you volunteered for BC Parks before or at other protected areas? Yes _____ No _____

If yes, provide protected area name, region or area and name of supervisor or contact person familiar with your experience and knowledge.

Protected Area: _____ Date: _____

Location: _____

Name: _____ Phone: (____) _____

Protected Area: _____ Date: _____

Location: _____

Name: _____ Phone: (____) _____

Other related volunteer experience: *(Attach additional sheet if necessary)*

Skills and Interests: Listed are some areas of interest and skills applicable to ER Warden volunteers. Please mark those that apply to you and feel free to add any that are not listed. (*Attach additional sheet with details of your experience if you wish*).

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Anthropology | <input type="checkbox"/> Fish & Wildlife Management | <input type="checkbox"/> Natural History | <input type="checkbox"/> Sign Language |
| <input type="checkbox"/> Archaeology | <input type="checkbox"/> Foreign Language | <input type="checkbox"/> Photography (slides/film/video) | <input type="checkbox"/> Soil Science |
| <input type="checkbox"/> Boating | <input type="checkbox"/> Geology | <input type="checkbox"/> Public Relations | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Education/ | <input type="checkbox"/> Horticulture | | _____ |
| <input type="checkbox"/> Interpretation | <input type="checkbox"/> Hydrology | | _____ |
| <input type="checkbox"/> Emergency Medical Assistance | | | |

Transportation:

Will you have a vehicle for transportation? Yes _____ No _____

Description: _____

(e.g. car, truck, van)

Medical: Do you have any medical conditions, physical disabilities or special needs?

Do you have first aid training? Yes _____ No _____

Describe _____

Do you have regular access to a cellular phone? Yes _____ No _____

How did you find out about the BC Parks' Volunteer Program?

- | | | |
|--|---|--|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Internet | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Magazine article | <input type="checkbox"/> Volunteer brochure | <input type="checkbox"/> BC Park's website |
| <input type="checkbox"/> Newspaper article | <input type="checkbox"/> From a volunteer | <input type="checkbox"/> Other: _____ |

References:

Please provide the names, addresses and telephone numbers of two persons familiar with your abilities, knowledge, or work experience.

Reference 1:

Name: _____ Relationship: _____

Address: _____ Phone: (_____) _____

Reference 2:

Name: _____ Relationship: _____

Address: _____ Phone: (_____) _____

I acknowledge that if this application is accepted a security check may be conducted.

(*Note: Security checks are required for all positions where you may have contact with children*)

Applicant's Signature

Date

