

Volunteer Application

Date ____ / ____ / ____ 1 Are you a TNC Member? Yes/# Years _____ No
 Name _____ Phone (h) _____ (w) _____ (c) _____
 Street _____ City/Zip _____
 E-Mail _____ Employer _____
 Birthday (MM/DD) _____ How did you hear about us? _____
 High School Some College College Degree Graduate Degree
 Degree _____ Degree _____
 Emergency contact _____ Relationship _____ Phone _____

*Please attach resume if possible.

Skills & Interests (check all areas where you are interested in volunteering your time)

Indoor/Administrative

<input type="checkbox"/> Administration	<input type="checkbox"/> Data Entry/Database Skills	<input type="checkbox"/> Photography/ Adobe Printshop
<input type="checkbox"/> Bookkeeping/Accounting	<input type="checkbox"/> Desktop Publishing	<input type="checkbox"/> Presentation Creation/ Powerpoint
<input type="checkbox"/> Bookstore/Sales	<input type="checkbox"/> Display Booth Attendant	<input type="checkbox"/> Prospect Research
<input type="checkbox"/> Catalog/Archive Library	<input type="checkbox"/> Editing/ Proofreading	<input type="checkbox"/> Public Outreach/ Speaking
<input type="checkbox"/> Catalog/Archive Photos	<input type="checkbox"/> Filing/ Organization	<input type="checkbox"/> Special Events
<input type="checkbox"/> Clerical, general	<input type="checkbox"/> Grant Writing	<input type="checkbox"/> Special Projects
<input type="checkbox"/> Computer Programming	<input type="checkbox"/> Greeter/ Reception	<input type="checkbox"/> Spreadsheets/ Excel
<input type="checkbox"/> Computer Support/Hardware	<input type="checkbox"/> Illustration/ Graphic Design	<input type="checkbox"/> Translation Spanish/English
<input type="checkbox"/> Copying	<input type="checkbox"/> Inventory	<input type="checkbox"/> Word Processing/ Word
<input type="checkbox"/> Creative Writing	<input type="checkbox"/> Maps/GIS (<i>prior exp. only</i>)	<input type="checkbox"/> Youth outreach

with: _____

Outdoor/ Field Work

<input type="checkbox"/> Bird Identification	<input type="checkbox"/> Field Trip Assistant	<input type="checkbox"/> Plumbing
<input type="checkbox"/> Botany	<input type="checkbox"/> Field Trip Leader	<input type="checkbox"/> Preserve Caretaker
<input type="checkbox"/> Carpentry	<input type="checkbox"/> Fire Fighting	<input type="checkbox"/> Rainwater Harvesting Docent
<input type="checkbox"/> Chainsaw	<input type="checkbox"/> Geology	<input type="checkbox"/> Recycling
<input type="checkbox"/> Construction	<input type="checkbox"/> Handyperson, general	<input type="checkbox"/> Re-vegetation
<input type="checkbox"/> Driver, auto	<input type="checkbox"/> Hydrology	<input type="checkbox"/> Roofing
<input type="checkbox"/> Driver, equipment	<input type="checkbox"/> Landscape/Garden/Yard Work	<input type="checkbox"/> Surveying
<input type="checkbox"/> Driver, truck/bus	<input type="checkbox"/> Masonry	<input type="checkbox"/> Trail Maintenance/Construction
<input type="checkbox"/> Ecological/Scientific Data Collection	<input type="checkbox"/> Monitoring: Conservation Easements	<input type="checkbox"/> Trail Patrol
<input type="checkbox"/> Electrical Wiring	<input type="checkbox"/> Monitoring: Fish, Plants, Birds	<input type="checkbox"/> Welding
<input type="checkbox"/> Engineering	<input type="checkbox"/> Monitoring: Water Quality	<input type="checkbox"/> Special Interest
<input type="checkbox"/> Errands	<input type="checkbox"/> Monitoring: Wet-Dry	_____
	<input type="checkbox"/> Painting	

Scheduling

Office work is usually limited to the office’s hours of 9-5 M-F. Some field work can be done on the weekends or weekays. Please indicate your preferred schedule.

Mon. Tues. Wed. Thurs. Fri. Weekends

Frequency: Weekly Biweekly Monthly As needed Other _____

1. Name _____ Phone _____ email _____
 2. Name: _____ Phone _____ email _____
 3. Name: _____ Phone _____ email _____

I understand that my enrollment as a Volunteer is contingent upon successful completion of the application process. I give my permission for the above-named references to release information about me.

Experience

Please give a brief description of prior work and volunteer experience that would benefit your volunteer activities and the goals of the Conservancy: _____

Policies

The Nature Conservancy has developed policies to guide both volunteers and staff in making decisions about their activities and conduct while working with The Nature Conservancy. To join our organization, either as staff or as a volunteer, each individual must conduct themselves in a manner consistent with the values of the Conservancy, and according to the following policies:

Confidentiality

Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves a single staff, volunteer, client, or other person, or involves overall Nature Conservancy business.

Intellectual Property

Advancement of its mission frequently calls for The Nature Conservancy to make information available to others, including informal partners, donors, members, and the general public. At the same time, the Conservancy, both staff and volunteers, must protect its intellectual property assets for tax, legal, and programmatic reasons, maximizing the financial return on these assets, and safeguarding the reputation of the organization. The Conservancy develops and owns numerous intellectual property assets, such as written and artistic works, photographs, maps, scientific databases, and computer application software. Cooperation with outside parties in the development of information, and publication and distribution of information to conservation partners, scientific collaborators, public officials, and others, including the general public, are integral and essential parts of our mission. The Nature Conservancy staff and volunteers will obtain and maintain appropriate legal protection for the Conservancy's intellectual property. The Conservancy will also respect the intellectual property rights of others and will not infringe upon those rights. Intellectual property rights to materials developed by employees or volunteers within the scope of their work for the Conservancy belong solely to the Conservancy itself, and may not be exercised without express written permission from the Conservancy.

Conflict of Interest

One of The Nature Conservancy's core values is "Integrity Beyond Reproach." In furtherance of this value, the Conservancy has enacted a **Conflict of Interest Policy** that applies to Conservancy staff, volunteers, board members, and others with whom we do business. Conservancy volunteers are required to read and understand this policy and to notify their supervisor or other appropriate staff member if a real or potential conflict of interest appears to exist. To guard against the appearance of impropriety, volunteers must refrain from any action that presents a possible appearance of conflict of interest unless and until given specific authorization to proceed.

Representation of The Nature Conservancy

Prior to any action or statement that might significantly affect or obligate The Nature Conservancy, volunteers should seek prior consultation and approval from appropriate staff. These actions may include, but are not limited to, public statements to the press, coalition or lobbying efforts with other organizations, or any agreements involving contractual or other financial obligations. Volunteers are authorized to act as representatives of The Nature Conservancy only as specifically indicated within their volunteer duty description and only to the extent of such written specifications. Volunteers recognize that while performing their duties, they are representatives of the Conservancy and should not express personal views (unless clarified as such) contradictory to the Conservancy's mission and principles.

Appreciation

The Nature Conservancy greatly values its volunteers. Our volunteers understand that their compensation is in the form of satisfaction of helping the Conservancy in its mission to preserve the plants, animals and natural communities that represent the diversity of life on Earth by protecting the lands and waters they need to survive.

As a volunteer I acknowledge and agree to the above policies of The Nature Conservancy. I also agree that The Nature Conservancy may publish any photos taken of me while volunteering.

Applicant's Signature: _____ Date: _____

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Risk Management Procedure

In the interest of the safety of children visiting our site and interacting with our volunteers, our volunteers may be required to have a background check and sign a commitment to youth safety. The results of that review will remain confidential and you have the right to review report findings and to challenge the factual accuracy of the review.

Liability Release

, _____, have volunteered to assist The Nature Conservancy, a nonprofit corporation organized and existing under the laws of the District of Columbia (the "Conservancy").

I have volunteered my time and services because of my support for the Conservancy and my desire to participate actively in the furtherance of its work. I understand that my activities as a volunteer entail a risk of physical injury or death and that I may be exposed to hazards arising from vehicular travel over both improved and primitive roads, use of tools and equipment and strenuous manual labor. I further understand that accidents or injuries may occur in locations or under circumstances where medical attention is not readily available. I expressly assume all risks associated with or arising from my volunteer activities. Because the assertion of claims against the Conservancy for personal injury occurring during my volunteer service would be antithetical to my support of the Conservancy and its goals and would reduce the ability of the Conservancy to accomplish its charitable purposes, I grant this release.

I agree to abide by all rules and regulations of The Nature Conservancy regarding safety and use of all equipment.

On behalf of myself, my estate and the personal representative thereof, my heirs and assigns, I hereby forever release The Nature Conservancy, its officers, directors, employees and agents, from any and all costs, claims, losses, liabilities or damages arising from or in any way related to, my service as a volunteer. I intend this release to be effective, regardless of whether the claim of liability is asserted in negligence, strict liability in tort, or other theory of recovery. For myself, my estate and the personal representative thereof, my heirs and assigns, I covenant and agree to make no claim, nor to institute any suit, action or proceeding against the Conservancy, its officers, directors, employees and agents, relating to any accident, incident or occurrence arising out of, or in connection with, my volunteer activities.

Volunteer Health Insurance Certification (required) Yes ____ No ____

I have executed this release on _____

date

signature

print name

city, state, zip

phone

signature of parent or legal guardian, if volunteer is a minor

Please note: The Conservancy provides secondary insurance coverage to supplement your own health insurance in the event of injury. If you would like more information about our policy, please ask for a pamphlet.

No matter where you work or what project you undertake, please think carefully about safety, and be cautious!

Return application to: The Nature Conservancy in Arizona location nearest you, or email to dboone@tnc.org or mail to The Nature Conservancy, 1510 E Ft Lowell Rd., Tucson, AZ 85719

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The Nature Conservancy STATEMENT OF CONFIDENTIALITY

TNC employees at all levels are frequently exposed to confidential or otherwise sensitive information in the conduct of normal job duties. Because all employees are placed in positions of trust, it is essential that there be no breach of this trust, intentional or otherwise, through the inappropriate disclosure of confidential information.

It has been requested that you, in the course of performing a special project or as part of your job duties and responsibilities, be provided with access to confidential employee information. It is essential that you affirm your understanding that there be no breach of confidentiality regarding this information. Such disclosure could, for example, result from the following:

- Discussing confidential employee data, including social security numbers, salaries, home addresses and deductions, with someone who has no need to know;
- Discussing proposed salary plans or personnel actions with someone who has no need to know;
- Leaving confidential information unsecured in your work area, including your computer, where unauthorized persons might see it. This is an act of omission – rather than an act of commission – but is just as much a violation of this policy;
- Disposing of confidential information in an inappropriate manner; providing your access codes and/ or password to someone who is not authorized to have your level of information access;
- Using confidential information obtained in the course of discharging your responsibilities for personal reasons (i.e., asking for a salary increase); and/or
- Discussing or speculating on TNC plans or strategies with reference to information not readily available from public sources.

These are just a few examples of how confidential information may be mishandled. It is in no way an all-inclusive list. It is easy to forget the sensitivity of the information involved. And, it only underscores the strict need to safeguard confidential information and to be circumspect in discussions with persons who have no need to know. Failure to do so undermines the credibility of The Nature Conservancy.

The purpose of this statement is to ensure that you have been made aware of our expectation that all information related to our employees is expected to remain confidential. Personal information should not be discussed, shared or otherwise disclosed to anyone else, either in or outside your department, unless authorized by your manager.

Violations of this policy will be grounds for disciplinary action, which may include termination.

STAFF USE ONLY - Submit Copy of application to Director of Volunteer Programs. Attach interview questions and reference check information for volunteers who meet the criteria requiring Youth Safety Qualification.

Date Rec. _____ Date Acknowledgement Letter Mailed _____ Date Notice to Staff _____
Date & Application Copied to _____ Date Interview Conducted _____
Assignment _____ Supervisor _____
Schedule _____ Notes _____