



Plant to planet.



# Junior Volunteer Application

The mission of BRIT, the Botanical Research Institute of Texas, is to conserve our natural heritage by deepening our knowledge of the plant world and achieving public understanding of the value plants bring to life. Volunteers are critical to our work. Thank you for your interest in working with us.

To better accommodate your interests and skills, please complete the information below and send it by mail, email or fax to the address listed at the end of this document by noon on Friday, May 5, 2017.

Today's Date: \_\_\_\_\_

## Contact Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
*(Street Address) (City) (State) (Zip Code)*

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Is this your:  Home  Mobile

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
*(Name) (Phone) (Relationship)*

How did you learn about volunteering with BRIT?  
\_\_\_\_\_

Why do you want to volunteer with BRIT?  
\_\_\_\_\_  
\_\_\_\_\_

Are there any medical conditions you would like us to know about?  
\_\_\_\_\_

## Volunteer Experience

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Duties: \_\_\_\_\_

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## Volunteer Schedule

When are you interested in volunteering?

|           | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-----------|--------|---------|-----------|----------|--------|----------|--------|
| Morning   |        |         |           |          |        |          |        |
| Afternoon |        |         |           |          |        |          |        |
| Evening   |        |         |           |          |        |          |        |

How many hours per week / month are you interested in volunteering? \_\_\_\_\_ Week \_\_\_\_\_ Month

When can you start volunteering? \_\_\_\_\_

Are you seeking volunteer hours to apply toward one of the following programs?

Community Service: \_\_\_\_\_ Other Program: \_\_\_\_\_ Please specify: \_\_\_\_\_

## Volunteer Skills & Interests

Are you interested in working indoors or outdoors? \_\_\_\_\_ Indoors \_\_\_\_\_ Outdoors \_\_\_\_\_ Both

Are you interested in working with the public? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you prefer working with adults or children? \_\_\_\_\_ Adults \_\_\_\_\_ Children \_\_\_\_\_ Both

## Education / Training

What grade will you start in Fall 2017? \_\_\_\_\_ Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior

Field of Study: \_\_\_\_\_

Other Applicable Training or Certifications:

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## Employment History

Current or Most Recent

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

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Prior employment experiences:

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

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Indicate where you have existing skills ("S") and/or interests ("I"):

\_\_\_\_\_ Mounting plant specimens

\_\_\_\_\_ Filing plant specimens

\_\_\_\_\_ Accessioning plant collections  
\_\_\_\_\_ Preserving fragile books  
\_\_\_\_\_ Editing Scientific Articles

\_\_\_\_\_ Digitizing plant specimens  
\_\_\_\_\_ Cataloguing library materials  
\_\_\_\_\_ Public Speaking

\_\_\_\_\_ Plant Identification  
\_\_\_\_\_ Medicinal plants  
\_\_\_\_\_ Living Roofs  
\_\_\_\_\_ Geology  
\_\_\_\_\_ Entomology

\_\_\_\_\_ Taxonomy  
\_\_\_\_\_ Poisonous plants  
\_\_\_\_\_ Landscape Mgmt  
\_\_\_\_\_ Watersheds  
\_\_\_\_\_ Wildlife

\_\_\_\_\_ Human uses of plants  
\_\_\_\_\_ Field research  
\_\_\_\_\_ Soils  
\_\_\_\_\_ Habitats  
\_\_\_\_\_ Herpetology

\_\_\_\_\_ Teaching, specify ages, subjects

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\_\_\_\_\_ Program Delivery  
\_\_\_\_\_ Graphic Design  
\_\_\_\_\_ Email Marketing  
\_\_\_\_\_ Facebook  
\_\_\_\_\_ Photography

\_\_\_\_\_ Program Preparation  
\_\_\_\_\_ Survey Development  
\_\_\_\_\_ Website Content  
\_\_\_\_\_ Twitter  
\_\_\_\_\_ Video Taping

\_\_\_\_\_ Program Evaluation  
\_\_\_\_\_ Media / Public Relations  
\_\_\_\_\_ Online Video  
\_\_\_\_\_ Other Social Media  
\_\_\_\_\_ Video Editing

\_\_\_\_\_ Event Management  
\_\_\_\_\_ Retail Sales  
\_\_\_\_\_ Guiding Tours  
\_\_\_\_\_ Working alone  
\_\_\_\_\_ Data Entry

\_\_\_\_\_ Fundraising  
\_\_\_\_\_ Merchandising  
\_\_\_\_\_ Visitor Relations  
\_\_\_\_\_ Working in teams  
\_\_\_\_\_ Filing / Organizing

\_\_\_\_\_ Grant Writing  
\_\_\_\_\_ Customer Service  
\_\_\_\_\_ Answering Phones  
\_\_\_\_\_ Supervising others  
\_\_\_\_\_ Preparing mailings

\_\_\_\_\_ LEED Buildings

\_\_\_\_\_ Building maintenance

\_\_\_\_\_ Carpentry / Crafts

\_\_\_\_\_ MS Word  
\_\_\_\_\_ MS Access  
\_\_\_\_\_ Adobe InDesign CS

\_\_\_\_\_ MS Excel  
\_\_\_\_\_ MS Publisher  
\_\_\_\_\_ Adobe Photoshop

\_\_\_\_\_ MS PowerPoint  
\_\_\_\_\_ Blackbaud Raisers Edge  
\_\_\_\_\_ GIS/GPS/Mapping

\_\_\_\_\_ Computer Programming, specify environments, languages, web or database experience

\_\_\_\_\_ Other, please specify:

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## References

### Personal Reference

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

### School Reference

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

## Confidentiality Agreement

The board of trustees, staff, members, donors, volunteers, and partners of BRIT, Botanical Research Institute of Texas, trust that records are kept confidential. As a volunteer, I may, during the course of my volunteer work, have access to documents, data, strategies or other information relating to BRIT, its donors, and its activities which may not be known to the general public. My work may involve sensitive issues receiving significant scrutiny, or knowledge of research results, plant locations, or discoveries.

As a Volunteer, I agree to hold in complete confidence, information about publications, research, collections, education programs, members, and financial data. For this reason, any documents or information provided to me may not be shared, under any circumstances, with any other organization or any individual without the prior written permission of BRIT.

## Consent Agreement

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by BRIT. I authorize BRIT, its affiliates and their representatives to investigate all information given and to secure additional job-related information, if necessary.

I authorize an investigative report to be made whereby information is obtained through personal interviews with third parties, such as family members, business associates, friends, neighbors, or others with whom I am acquainted. I understand and consent to an inquiry that may include information as to my character, general reputation, and personal characteristics, whichever may be applicable.

As a JR Volunteer, I agree to:

- Adhere to the philosophy and policies of BRIT.
- Complete all required volunteer training and orientation.
- Participate in individual supervision with staff or other volunteers as required.
- Complete and submit paperwork as required.
- Complete a minimum of 30 hours by August 11, 2017.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

As a parent or guardian, are you willing to help ensure that your child is being held accountable for acting as a model volunteer and for following BRIT procedures? \_\_\_\_yes \_\_\_\_no

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Relationship

Please return your completed application via one of the methods below. If you have any questions, contact the Volunteer Program Office at 817-546-1846.

Mail to: Volunteer Program Office, BRIT, 1700 University Drive, Fort Worth, TX 76107-3400

Email to: [volunteer@brit.org](mailto:volunteer@brit.org) Fax to: 817-332-4112

**FOR OFFICE USE ONL**

DATE RECEIVED: \_\_\_\_\_  
BACKGROUND ENTERED: \_\_\_\_\_  
BACKGROUND CLEARED: \_\_\_\_\_  
APS ASSIGNED: \_\_\_\_\_  
APS COMPLETED: \_\_\_\_\_

EMAIL: \_\_\_\_\_  
ORIENTATION: \_\_\_\_\_  
START DATE: \_\_\_\_\_

