



29 Lily Rd, Roswell NM, 88201 • Phone (505) 730-6352

## Volunteer Application

### GENERAL INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

Are you 13 years of age or older? YES  NO

Have you ever applied here before? YES  NO   
 If yes, when? \_\_\_\_\_

Have you ever volunteered here in the past? YES  NO

Have you ever been convicted of any law violation? (exclude minor traffic violations)  
 Include any plea of "guilty" or "no contest." YES  NO

If yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

(A conviction will not necessarily disqualify an applicant.)

Do you have a valid driver's license? (Applies to barn chore and grounds volunteers) YES  NO

Driver's License Number: \_\_\_\_\_ Class: \_\_\_\_\_ State: \_\_\_\_\_

Have you had a driver's license suspended or revoked in the last 3 years? YES  NO

If yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

### EDUCATION

| LIST NAME AND ADDRESS OF SCHOOLS | NUMBER OF YEARS COMPLETED | DIPLOMA / DEGREE / CERTIFICATE | SUBJECTS STUDIED |
|----------------------------------|---------------------------|--------------------------------|------------------|
| HIGH SCHOOL/GED                  |                           |                                |                  |
| COLLEGE or UNIVERSITY            |                           |                                |                  |
| VOCATIONAL OR TECHNICAL          |                           |                                |                  |

## WORK HISTORY

Please provide names of employers in consecutive order with present or most recent employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

**Please Note:** an offer for a volunteer position may be contingent upon acceptable references from current and former employers.

|                  |              |                                      |
|------------------|--------------|--------------------------------------|
| NAME OF EMPLOYER |              | JOB TITLE AND DUTIES                 |
| CITY, STATE, ZIP |              | DATES OF EMPLOYMENT (MO/YR – MO/YR): |
| SUPERVISOR(S)    | PHONE NUMBER | REASON FOR LEAVING                   |

|                  |              |                                      |
|------------------|--------------|--------------------------------------|
| NAME OF EMPLOYER |              | JOB TITLE AND DUTIES                 |
| CITY, STATE, ZIP |              | DATES OF EMPLOYMENT (MO/YR – MO/YR): |
| SUPERVISOR(S)    | PHONE NUMBER | REASON FOR LEAVING                   |

## ADDITIONAL INFORMATION

Please indicate your first, second, and third choice for volunteer positions:

Advanced Barn Chores: \_\_\_\_\_ Intermediate Barn Chores: \_\_\_\_\_ Beginner Barn Chores: \_\_\_\_\_  
 Facilities/Grounds Maintenance: \_\_\_\_\_ Administrative/Office: \_\_\_\_\_

Please indicate which times during the week you are available to volunteer by checking the appropriate boxes:

|                            | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY | SUNDAY |
|----------------------------|--------|---------|-----------|----------|--------|----------|--------|
| MORNING<br>(8 – 11 am)     |        |         |           |          |        |          |        |
| MID DAY<br>(11AM – 3PM)    |        |         |           |          |        |          |        |
| AFTERNOON<br>(3 – 5:30 pm) |        |         |           |          |        |          |        |

Please indicate how often you are available to volunteer:

Every Week: \_\_\_\_\_ Twice a Month: \_\_\_\_\_ Once a Month: \_\_\_\_\_ Other: \_\_\_\_\_

1. What attracted you to our organization? Is there any aspect of our work that most motivates you to seek a volunteer position at RLER? \_\_\_\_\_

\_\_\_\_\_

2. What would you like to accomplish by volunteering at RLER? What would make you feel like you've been successful? \_\_\_\_\_

\_\_\_\_\_

3. What have you enjoyed most about your previous volunteer work? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
4. What have you enjoyed the least about your previous volunteer work? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
5. What are your expectations as a RLER volunteer? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Please describe your horse experience, if any: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
7. What machines or equipment can you operate that may be used in farm work or property maintenance? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. Please describe any other special skills or talents you may have that would be helpful to RLER: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
9. Describe any physical limitations that may affect your ability to perform certain tasks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**REFERENCES**

- Have you worked or attended school under any other names? YES  NO   
 If yes, give names: \_\_\_\_\_
- Are you presently employed? YES  NO   
 If yes, whom do you suggest we contact? \_\_\_\_\_
- Have you ever been fired from a job or asked to resign? YES  NO   
 If yes, please explain: \_\_\_\_\_
- Give three references, not relatives or former employers
1. Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Relationship: \_\_\_\_\_
  2. Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Relationship: \_\_\_\_\_
  3. Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

**PLEASE READ CAREFULLY BEFORE SIGNING**

I certify that all information provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration, and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand I MAY be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-volunteering drug screen as a condition of volunteering, if required. **I UNDERSTAND THAT THIS APPLICATION OR VERBAL STATEMENTS BY MANAGEMENT DO NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF VOLUNTEERING NOR GUARANTEE A VOLUNTEER POSITION FOR ANY DEFINITE PERIOD OF TIME. I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF RLER AND MAY BE DISMISSED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.**

I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_  
Volunteer

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Parent or Guardian if volunteer under 18 years old

This application will remain active for a limited time. Ask RLER's Volunteer Coordinator for details.