

Availability

Please circle which **mandatory** CIT training session you can

attend: Saturday, **June 1** (10:00-12:30PM)

OR

Wednesday, **June 5** (4:30-7:00 PM)

A parent/guardian is required to attend the first half hour.

You are required to volunteer for three weeks (half days only). To ensure we can schedule you the three week minimum please list **all** of the weeks and times that you will be available.

Please indicate if you are available for the **AM session** (8:30-1:00) and/or **PM session** (12:00-4:30)

____ June 17-21 (AM/PM) ____ July 8-12 (AM/PM) ____ July 29-Aug 2 (AM/PM)

____ June 24-28 (AM/PM) ____ July 15-19 (AM/PM) ____ August 5-9 (AM/PM)

____ July 1-3* (AM/PM) ____ July 22-26 (AM/PM) ____ August 12-16 (AM/PM)

*Hartley Halfpint camps (3 year old camps) only meet Wednesday-Friday. *NO camp on July 4 or 5*

Preferred ages: ____ 3 year olds ____ 4-5 year olds ____ 6-7 year olds ____ 8-9 year olds ____ 10-12 year olds

Are there any ages you would prefer NOT to work with? _____

Please list the top two camps you would be interested in helping with. You are **NOT** guaranteed these camps.

References

A reference should be someone who is not related to you that can talk about your personality, skills, abilities, and interests. Please include a current email address for each reference.

1. Name _____ Phone _____ Home Work Cell _____
Please circle the type of phone number this is.

E-mail _____ How do you know this person? _____

2. Name _____ Phone _____ Home Work Cell _____
Please circle the type of phone number this is.

E-mail _____ How do you know this person? _____

What is your t-shirt size (adult)? **XS S M L XL**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if accepted as a CIT, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if accepted as a CIT my volunteer position may be terminated at any time without any prior notice.

Signature Date

Parent/guardian signature Date

Please return this application to:

Jenni Stafford-Faris
Hartley Nature Center
3001 Woodland Ave. Duluth, MN 55808
218-724-6735 edassistant@hartleynature.org

Applications are due **April 22** for priority scheduling.