Volunteer Application The Toledo Zoo P.O. Box 140130 Toledo, OH 43614-0801



The Toledo Zoo does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sec, marital status, national origin, disability, veteran status, or any other status as protected by local, state, or federal law.

Please complete this application legibly in ink. Please respond to all questions indicating N/A to those that do not apply.

Name:	_ Are you over the age of 18 years? Yes □ No □ If no, please complete ZOOTeen Volunteer Application			
Address:	_			
City, State, Zip:	Home Phone:			
Have you ever been employed or volunteered at the T If yes, dates and position:				
Where are you currently employed?				
What is your job title?	How long have you worked there?			
	Can we call you at work? Yes D No D			
Volunteer Position desired:				
Educational Background:				

Time of Availability: (Please provide an overview of available times, i.e. evenings after 5; mornings; all day...)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Have you ever been convicted of a felony or misdemeanor other than a minor traffic offense? Yes	No 🗆

If yes, please explain nature and location of conviction:

Personal References (Not relatives)

Name		Street Address	City, State, Zip	Occupation	Telephone
Volunteer 3	Experience				
From	То	Agency	Duties		
		ion, and Interests lification acquired from c	other employment or volu	nteer positions)	

Please Read Carefully Before Signing - Applicant's Certification and Agreement

I hereby certify that the information and facts set forth in this volunteer application are true, complete and accurate to the best of my knowledge. I understand that any falsifications, misrepresentations or omissions of any facts in this application or other documents submitted for consideration of volunteer opportunities will be cause for denial or immediate termination, regardless of the timing or circumstances of discovery.

I agree and understand that as a volunteer, the Zoo is not obligated to provide me any payment or benefit for my services. I also agree to release the Toledo Zoological Society, its Board of Trustees, employees and agents (collectively "the Zoo") from any liability in the event I am injured or suffer damage as a result of the negligence of the Zoo. I agree not to pursue any claim or initiate any action against the Zoo in the event I am injured or suffer damage as a result of the negligence of the negligence of the Zoo. I understand and agree that this express assumption of risk, release and waiver is made on my own behalf and on behalf of my heirs, executors, representatives, assigns and when applicable, my minor child.

I agree to advise the Zoo in writing of any physical limitations which could affect or be affected by any volunteer activities I assume. I understand it is my responsibility to provide this information and I release the Zoo from any liability for injuries or illnesses which result from my failure to advise the Zoo in writing of any such limitations.

I understand that the Zoo may require alcohol, drug and substance abuse screening, and I consent to such an examination and authorize the release of the results of such an examination to the Zoo.

I hereby authorize investigation of all statements in this application and request any company, institution, or persons contacted as part of this investigation to provide any and all pertinent information. To assure their cooperation, I hereby release them from all liability for any damage that may result from furnishing same to the Zoo.

Signature of Applicant