

**AUSTRALIA ZOO VOLUNTEERING – HIGH SCHOOL PROGRAMS
APPLICATION FORM**



PLEASE FORWARD YOUR APPLICATION WITH RESUME TO:
volunteers@australiazoo.com.au, or alternatively:
Volunteer Co-Ordinator
AUSTRALIA ZOO
1638 STEVE IRWIN WAY
BEERWAH, QLD, 4519

**PICTURE
(REQUIRED)**

Please include a separate picture (JPEG format) when submitting your application via email or a small printed picture when submitting by mail.

This image is required as part of the application process.

Volunteer application will not be progressed without all required information.

NAME:

NAME ON BADGE:

ADDRESS:	STREET:	<input type="text"/>		
	CITY/SUB:	<input type="text"/>		
	STATE:	<input type="text"/>	POSTCODE:	<input type="text"/>

MOBILE:	<input type="text"/>	HOME PHONE:	<input type="text"/>
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EMAIL:	<input type="text"/>	AGE:	<input type="text"/>
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DATE OF BIRTH (*minimum age is 14 years/for identification purposes also*):

EMERGENCY CONTACT PERSON:

RELATIONSHIP TO YOU:

EMERGENCY CONTACT DETAILS:	Address:	<input type="text"/>
	Phone:	<input type="text"/>
	Email:	<input type="text"/>

SCHOOL NAME:

SCHOOL CONTACT PERSON:	<input type="text"/>	SCHOOL CONTACT PERSON'S POSITION:	<input type="text"/>
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SCHOOL CONTACT PERSON'S EMAIL:	<input type="text"/>	SCHOOL CONTACT PERSON'S PHONE NUMBER:	<input type="text"/>
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Which program are you applying for? (dd/mm/yy) - Please note applications are open on a term by term basis	FROM:	<input type="text"/>	TO:	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PLEASE PROVIDE REFEREES THAT MAY BE CONTACTED:

PERSONAL (required)			
FIRST PERSONAL REFEREE		SECOND PERSONAL REFEREE	
NAME:	<input type="text"/>	NAME:	<input type="text"/>
PHONE:	<input type="text"/>	PHONE:	<input type="text"/>
EMAIL:	<input type="text"/>	EMAIL:	<input type="text"/>

Have you ever worked, volunteered or applied to volunteer or work at Australia Zoo, Wildlife Warriors or Australia Zoo Hospital previously? (please provide dates & relevant details)

Are there any medical/health considerations or physical limitations that could impact your ability to perform any volunteer activities or that we may need to be aware of to ensure your safety & welfare while volunteering at Australia Zoo?

PLEASE NOTE : Australia Zoo has a commitment to ensuring a safe workplace for all members of the team. Disclosure of medical/health considerations or physical limitations that could impact your ability to perform any volunteer activities is required in order to ensure appropriate provisions are in place. Non disclosure may result in an inability to proceed with program placement

An Australia Zoo Volunteer shirt will be provided for you to wear during your placement period. Please select from the following : (Please tick)

MENS (Australia)	<input type="checkbox"/>	Small	<input type="checkbox"/>	Medium	<input type="checkbox"/>	Large	<input type="checkbox"/>	X-Large	<input type="checkbox"/>	XX-Large
WOMENS (Australia)	<input type="checkbox"/>	10	<input type="checkbox"/>	12	<input type="checkbox"/>	14	<input type="checkbox"/>	16	<input type="checkbox"/>	18

If you require a shirt size not listed above, please specify:

PLEASE ANSWER THE FOLLOWING QUESTIONS

WHAT PROMPTED YOU TO APPLY TO VOLUNTEER AT AUSTRALIA ZOO?

HOW DO YOU/WOULD YOU LIKE TO CONTRIBUTE TO ANIMAL CONSERVATION AND EDUCATION?

WHAT DO YOU BELIEVE OR HOPE THE VOLUNTEER EXPERIENCE WILL PROVIDE YOU WITH?

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WHAT ARE YOUR 3 MAIN STRENGTHS AND HOW WOULD YOU APPLY THEM AT AUSTRALIA ZOO?

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PLEASE NOTE BEFORE SUBMITTING YOUR APPLICATION

- 1 Please ensure you include all requested support information and documentation with your volunteer application.** This includes current resume/CV and photo image. Your resume/CV should include your employment history, skills and any volunteer experience. ***Applications will not be processed*** unless all information is provided. Please note that associated delays in processing may impact placement opportunities.
2. Due to the high interest levels in Australia Zoo Volunteer Programs, Australia Zoo reserves the right to select the most suitable applicants for available placements within programs.
3. By signing and submitted this volunteer application form you declare that: ***'I have completed these forms myself and declare that all the information included herein is correct to the best of my knowledge'***.
4. Australia Zoo have a commitment to ensuring a safe workplace for all members of the team. All participants on volunteer programs will be required to comply with all Workplace Health and Safety procedures, policies and guidelines determined by Australia Zoo.

Failure to comply with these and other relevant operational policies, procedures and guidelines may result in a review of program participation.

APPLICANT
SIGNATURE:

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DATE:

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PARENT/GUARDIAN
SIGNATURE:

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DATE:

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