

Forest Lawn Heritage Foundation 1411 Delaware Avenue, Buffalo, NY 14209 Phone (716) 885-1600 Fax (716) 881-6482

www.forest-lawn.com

VOLUNTEER APPLICATION

THANK YOU FOR APPLYING TO SERVE AS A VOLUNTEER AT FOREST LAWN!

Forest Lawn truly appreciates your interest and willingness to assist us in fulfilling our mission to **sustain the beauty, tell the stories and assure the future.**

Kindly provide the information below and return this application with resume and references attached to the attention of Ginny Wallace, Director of Community Engagement, Forest Lawn,1411 Delaware Avenue, Buffalo, New York 14209 or gwallace@forest-lawn.com. If your application is accepted, you will be matched with specific volunteer opportunities as determined by Forest Lawn's current needs, and the talents, interests, and experience you have listed. Please note that while applications are accepted routinely, that does not necessarily mean volunteer positions are currently available. You will be contacted for a volunteer interview at which time current volunteer opportunities will be discussed. Again, thank you so much for your interest in Forest Lawn. Please contact us with any questions.

PERSONAL INFORMATION: City_____State___Zip____ (Home/Work/Cell) Phone Email Address Are you 18 years of age or older? Yes No Please note that email will be used as the primary method of communication. **EMERGENCY CONTACT INFORMATION:** Name Relationship Phone In which volunteer activities are you interested in participating? Please check all that apply. ☐ Event Assistant (Greeter, Ticket Sales, etc) ☐ Docent/Giving Tours Administrative Office Support ☐ Event Subcommittee Leader ☐ Genealogy / Research ☐ Grant Writing ☐ Gardening / Landscaping ☐ Photography Documentation of Monuments, Mausoleums & Landscape ☐ Public Relations Support ☐ Web / IT Support Other: What are the most common days/times of availability? Please note that times vary based upon the specific programs and events. Please check all that apply. Afternoon ____Evening Weekdays: ____Morning Afternoon Evening Weekends: Morning ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Are there any months that you may not be available?

Why do you want to volunt	eer at Forest Lawn?		
What is your current occup	pation? Previous	_	
Please attach a resume or summarize your education (degrees awarded) and professional experience.			
Please list any special skills	s/talents or physical limitations that we should be aware of.	_	
Please list previous volunte	eer experience.	_	
Have you ever been dismis	ssed from another volunteer program?	_	
application or termination of sub statements made in my applicati employees) to respond to questi	rovided is true. I understand that any false statement made herein is sufficient reason for reject osequent volunteering regardless of date of discovery. I authorize Forest Lawn to investigate a tion material. I authorize such education institutions and employers and others (and their agentions concerning information given in this application material and I further release from liability ons providing such information to Forest Lawn.	ıll ts or	
	position may be terminated at any time by either party for any reason at all. I will submit to a reversion may be terminated at any time by either party for any reason at all. I will submit to a reversion may be terminated at any time by either party for any reason at all. I will submit to a reversion may be terminated at any time by either party for any reason at all. I will submit to a reversion may be terminated at any time by either party for any reason at all. I will submit to a reversion may be terminated at any time by either party for any reason at all.	view of my	
☐ I will attend all relevant training	ng sessions, and will read and abide by all Forest Lawn policies and procedures.		
☐ I agree to allow Forest Lawn	to use photographs and/or videos of my participation in any program for promotional or other p	ourposes.	
☐ I attest that no offer of compe	ensation, benefits, or future employment is included with this position.		
☐ Further, I agree to hold as ab concerning Forest Lawn, its visit	osolutely confidential, all privileged and/or sensitive information, which I may obtain directly or itors, staff, and other volunteers.	ndirectly,	
Signature			
Driver's License #/ State	Birthday		
REFERENCES: Please	list two non-family references.		
1) Name			
Address			
Home Phone	Work Phone	_	
2.) sName		_	
Home Phone	Work Phone		

Are you able to donate at least 40 hours of volunteer time during the coming year?