



FRIENDS OF  
BOERNER  
BOTANICAL  
GARDENS  
Milwaukee County's Living Museum

## FRIENDS OF BOERNER BOTANICAL GARDENS VOLUNTEER APPLICATION FORM

**TODAY'S DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**CELL/ ALTERNATE PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**Are you 18 years or older?**  yes  no **Date of birth:** \_\_\_\_\_

**Have you ever volunteered with the Friends of Boerner Botanical Gardens before? If so, when?** \_\_\_\_\_

**How did you learn about our opportunity?**

\_\_\_\_\_

**What are your areas of interest?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Current Employment Status:**  full time  part time  retired  other

**Current Employer:** \_\_\_\_\_

**EDUCATION:**

**School:** \_\_\_\_\_ **Area of Study:** \_\_\_\_\_ **Years Completed:** \_\_\_\_\_ **Degree:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EXPERIENCE (PAID AND VOLUNTEER):**

Name of Organization:

Position/Duties:

Dates:

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**SKILLS and HOBBIES:**

What skill, hobby or interest can you share with FBBG (gardening, retail experience, computer skills, customer service [i.e. phone calls], outreach events)

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**MEMBERSHIPS, AFFILIATIONS AND CLUBS:**

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**WHAT VOLUNTEER POSITION ARE YOU INTERESTED IN? (Please check 3 choices):**

- |  |  |
|--|--|
| <input type="checkbox"/> ADULT EDUCATION     | <input type="checkbox"/> ADMINISTRATION/CLERICAL |
| <input type="checkbox"/> CHILDREN'S PROGRAM  | <input type="checkbox"/> LIBRARY AIDES           |
| <input type="checkbox"/> GARDEN WALK DOCENTS | <input type="checkbox"/> SPECIAL EVENTS          |
| <input type="checkbox"/> GIFT SHOP ASSISTANT |  |
| <input type="checkbox"/> OTHER ( _____ )     |  |

\*For in-garden volunteering, please see Milwaukee County Volunteer Form. *Please note that this involves light physical tasks such as bending, kneeling, lifting, digging, etc.*

Please indicate the days and times you prefer to volunteer:

Sunday  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday

Best Times: \_\_\_\_\_ AM \_\_\_\_\_ PM

Desire Start Date \_\_\_\_\_

