



Dear Youth Volunteer Applicant,

Thank you for your interest in the Georgia Aquarium's Youth Volunteer Program! Please read this page carefully as it has important information about the program and application process.

- **Teens must be 14 or 15 years old by the application deadline below.** (Anyone who is 16 is eligible to be a regular volunteer. *If you will be turning 16 within the first 2 months of the program, please wait & apply as a regular volunteer.*)
- **Application packets must be complete & postmarked by April 1st, 2012.**
To be eligible for consideration, an application packet must contain all of these items:
 - the completed application form (page 2)
 - your answers to **all** enclosed essay questions (page 3)
 - the signed parental consent form (page 3)
 - the volunteer agreement signed by the teen & parent/guardian (pages 4-5)
 - *2 signed referral forms from **teachers, employers or community leaders** (pages 6-7), placed in sealed envelopes by the writers and mailed with the application.*
- **Many youth volunteer jobs involve working with Aquarium guests of all ages;** applicants should be comfortable working with people. **Also note that there will be limited, if any, direct contact with the Aquarium's animals.**
- **During the summer session, youth are required to assist with Camp H2O for 1-week (40 hours) and then complete a minimum of 6 hours each week for three months (totaling 112 hours).**
- **Youth volunteers are required to attend an Information Session (with a parent) on, either April 18th from 6pm to 8pm or April 21st from 1am to Noon AND attend a full day of training on May 5th from 9am to 5pm. (NO make-up sessions will be available for either date)**
- **If you cannot attend the Information Session or Training date, please do not apply at this time.**
- **Youth volunteers are required to observe the Georgia Aquarium dress, attendance and behavior codes.**
- **Applicants will be required to bring a drivers license or birth certificate & photo ID to the Information Session.**
- **There is limited space in the Youth Volunteer Program; therefore, not all applicants will be accepted into the program.**
- **Selected Youth Volunteers are required to pay the standard \$30 Youth Volunteer Fee.**

You will be sent an email notifying you that we have received your application; however, we will not begin contacting teens selected until after April 10th. If you were not selected, you will receive an email by the end of April.

Please keep this page for your reference. If you have questions about the program/application process, email volunteer@georgiaaquarium.org

Sincerely,

Youth Programs Coordinator



YOUTH VOLUNTEER APPLICATION – MUST be completed by applicant

Please print clearly or type.

Please remember you must be 14 years old by the application deadline.

Personal information:

Name _____
Last First M.I. Nickname

Address _____
Street Address City State ZIP

County _____ School _____

Phone _____ Best time to call _____

Alternate Phone _____

Email address _____

Date of Birth ____ / ____ / ____ Age ____ Grade (in spring '12) _____

Emergency Contacts:

1. Name _____ Relationship _____

Phone (day) _____ Phone (eve) _____

2. Name _____ Relationship _____

Phone (day) _____ Phone (eve) _____

Scheduling:

Please indicate your top **three** choices of weeks you'd like to volunteer for Camp H2O, in order of preference.

Example:

3 04/02/2012 1 04/03/2012 ___ 04/04/2012 ___ 04/05/2012 2 04/06/2012

___ 04/02/2012 ___ 04/03/2012 ___ 04/04/2012 ___ 04/05/2012 ___ 04/06/2012

Experience:

List any past work or volunteer experience you have had below (e.g. conservation organization, leadership, teacher aide, babysitting, pet-sitting, etc). Include position title, location & dates (most recent first)

Extra-curricular Activities:

List any extra-curricular activities that you currently participate in. (e.g. sports, organizations, clubs, etc)



ESSAY QUESTIONS:

Applicant should answer the following questions their own words. Answers should be numbered and typed or neatly printed on separate sheet(s) of paper—2 pages max.

1. There are many places you could choose to volunteer; why have you chosen the Georgia Aquarium?
 2. What do you believe makes you stand out more than other applicants?
 3. What do you hope to gain from your experience in the Georgia Aquarium Youth Program?
 4. Why do you think aquariums are important; why do you think volunteers are important?
 5. Youth volunteers are required to work with the general public, campers and other teens.
Please share with us any experiences you have had that demonstrates your ability to work with the following groups: children, adults, other teens.
 6. How comfortable are you approaching & talking to children, adults, and other teens?
 7. The Georgia Aquarium Youth Volunteer Program requires a commitment of 112 hours over a 4-month period. Are you able to commit to this?
 8. What is your biggest time commitment that could interfere with the Youth Volunteer Program and how will you manage your time between commitments?
 9. You must be able to attend the Information Session & attend one full day of training. Which Information Session will you & a parent be able to attend (April 18th from 6pm to 8pm or April 21st from 10am to noon)? Will you be able to attend a full day of training on Saturday, May 5th, 2012 (9am to 5pm)?
 10. Who will be providing you with transportation to and from the Aquarium?
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PARENTAL CONSENT FORM: To Be Completed by the Parent(s) or Guardian(s)

In order for your teen to participate in the Georgia Aquarium's Youth Volunteer Program, we must have your written consent. Please be aware that your teen is committing to a 4-month program (May - August). During this program, your teen will be required to volunteer a minimum of 112 hours by assisting Summer Camp H2O for one full week and volunteering 6 hours per week for three months. All Youth Volunteers must also pay the standard \$30 Youth Volunteer Membership Fee. Individual shift lengths and start times vary. It is important that they are on time for their shifts and have reliable transportation.

Please read and sign below.

I give permission for _____ (Teen's Name) to volunteer in the Georgia Aquarium's Youth Volunteer Program. I also give my consent for her/him to participate in any field trips and collaborative projects that the Georgia Aquarium may coordinate. Additionally, I will arrange or provide transportation for said teen to be at all training sessions (i.e.) and be on time for all scheduled shifts. I understand that missing training, shifts or repeated tardiness can result in termination from the program. I understand that if my child is accepted into the program, but does not complete it, he/she can not apply to become a regular volunteer until the end of the original 4-month program date.

Please note: Georgia Aquarium does not administer or dispense medication of any kind. If your teen requires medication, testing or medical monitoring, during any teen volunteer shift, he/she must be able to administer it him/herself.

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date



GEORGIA AQUARIUM YOUTH VOLUNTEER AGREEMENT:

In consideration for being accepted as a volunteer by the Georgia Aquarium's Youth Volunteer Program, I agree as follows:

- 1. At-Will Relationship.** Even though I have made a commitment to serve as a volunteer for at least one year, I understand that my status as a volunteer may be terminated at any time by me, or by the Georgia Aquarium Youth Volunteer Program for any reason, with or without cause. I also understand that if I, the teen, ends my commitment to the program prior to the original 4-month program end date, I may not apply to become a regular volunteer until after the original program end date.
- 2. No Employee Benefits.** I shall not be considered an employee for any purpose, and no health, accident or workmen's compensation insurance, nor any other type of employee benefits, shall be provided for me by the Georgia Aquarium.
- 3. Training.** I understand that certain volunteer activities require special training. I shall not undertake such activities without the required training. I also understand that my volunteer activities will not qualify me as an animal keeper and will not lead to a paid position.
- 4. Rules.** I shall read and abide by all of the Bylaws, Rules and Guiding Policies of the Georgia Aquarium concerning volunteers.
- 5. Auto Insurance.** I shall not operate a personal automobile for volunteer activities unless I have at least the minimum amount of liability insurance required by Georgia law.
- 6. Confidential Information.** I understand that information obtained through my work as a volunteer may be considered privileged or proprietary information of the Georgia Aquarium. I agree to keep all such information confidential except to the extent disclosure of such information is expressly authorized and directed by an official of the Georgia Aquarium. In particular, I agree to make no statements or release any information about the Georgia Aquarium to any news media except as expressly authorized by the Georgia Aquarium.
- 7. Assumption of Risk.** I understand that handling Aquarium animals is potentially dangerous because they are wild animals whose actions are unpredictable regardless of past behavior. If I should elect to handle animals, I assume all risks of handling animals including, but not limited to, being bitten, clawed or otherwise injured.
- 8. Release from Liability.** I hereby release the Georgia Aquarium and their respective agents, representatives, trustees, officers, employees and volunteers (the "Released Parties") from any and all liability whatsoever arising out of any damage, loss or injury to me or my property incurred as a result of my volunteer activities for the Georgia Aquarium. I further agree to indemnify, save and hold harmless the Released Parties from any and all losses, damages and liabilities for indemnities, contribution or otherwise with respect to any and all property damage, personal injury and/or death incurred in connection with my volunteer activities, as might be asserted by a third party (defined as any party other than the Released Parties or me). My estate shall hold harmless the Georgia Aquarium and their respective agents, representatives, trustees, officers, employees and volunteers from any claims or actions by my relatives or legal representatives based on my death or injury as a result of my volunteer activities.



9. Permission to Take and Use Photographs. I acknowledge that the Georgia Aquarium might from time to time take photographs of its volunteers during various Aquarium programs and activities and that such photographs might be used in Aquarium brochures and Aquarium program advertising (the "Photographs"). I further acknowledge that as a result of my volunteer work and/or presence at the Aquarium premises, my image might from time to time be included in the Photographs. I hereby authorize the Foundation and its agents to take, use, display, publish, reproduce and distribute any and all Photographs that include my image and to create derivative works based upon all such Photographs.

Youth Volunteer Signature Date

Parent/Guardian Signature Date

REFERENCES

Ask 2 adults you know well and are **teachers, employers or community leaders** that you have known for at least 1 year to complete the attached referral forms and **return them to you in a signed, sealed envelope**. Send these envelopes with your completed application. Thank You.

List the names, relationships, and phone numbers*:

1. _____
Name Relationship Phone

2. _____
Name Relationship Phone

*** Reference forms that are not submitted in signed, sealed envelopes with the application will not be accepted. References from individuals that are neither a previous teacher, previous employer, or community leader will not be accepted.**

Reminder: You must mail all the application materials listed on page 1 by April 1st, 2012 to:

Youth Volunteer Program
Georgia Aquarium
225 Baker Street
Atlanta, Georgia 30313

Thank you for applying!



GEORGIA AQUARIUM REFERRAL 1:

To the Recommender:

You are being asked to evaluate a teenager who is interested in Georgia Aquarium's Youth Volunteer Program. We are looking for responsible, outgoing, and motivated teens to volunteer their time and talent to our program. Thank you in advance for taking the time to evaluate this teen's skills. ***Please return this form in a signed, sealed envelope to the youth volunteer applicant.***

Name of applicant: _____

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

How well do you know the applicant? ____ Very Well ____ Well ____ Some ____ Little

I recommend this applicant to the Youth Volunteer Program with (check one that represents your opinion)
 _____ Great enthusiasm ____ Confidence ____ Some confidence ____ Reservation

Please rank the applicant's skills by completing the following table:

Skill	Poor	Fair	Good	Excellent	Unknown
Dependability					
Common Sense					
Oral communication skills					
Ability to analyze & solve a problem					
Cooperation					
Ability to work & communicate with children					
Ability to work & communicate with peers					
Ability to work & communicate with adults					
Behavior in a group situation					
Leadership skills					
Adaptability					
Ability to work independently					
Ability to accept constructive feedback					
Ability to follow directions					

The Georgia Aquarium's Youth Program is a highly competitive. Any comments you provide that might provide further insight into this applicant's suitability are much appreciated. Please feel free to attach an additional sheet of paper if you need additional space for comments

Comments:

Your name: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

Thank You for your time! For more information please contact: volunteer@georgiaaquarium.org



GEORGIA AQUARIUM REFERRAL 2:

To the Recommender:

You are being asked to evaluate a teenager who is interested in Georgia Aquarium's Youth Volunteer Program. We are looking for responsible, outgoing, and motivated teens to volunteer their time and talent to our program. Thank you in advance for taking the time to evaluate this teen's skills. ***Please return this form in a signed, sealed envelope to the youth volunteer applicant.***

Name of applicant: _____

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

How well do you know the applicant? ____ Very Well ____ Well ____ Some ____ Little

I recommend this applicant to the Youth Volunteer Program with (check one that represents your opinion)
 _____ Great enthusiasm ____ Confidence ____ Some confidence ____ Reservation

Please rank the applicant's skills by completing the following table:

Skill	Poor	Fair	Good	Excellent	Unknown
Dependability					
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Ability to work & communicate with adults					
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Ability to work independently					
Ability to accept constructive feedback					
Ability to follow directions					

The Georgia Aquarium's Youth Program is a highly competitive. Any comments you provide that might provide further insight into this applicant's suitability are much appreciated. Please feel free to attach an additional sheet of paper if you need additional space for comments

Comments:

Your name: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

Thank You for your time! For more information please contact: volunteer@georgiaaquarium.org