



Division of Wildlife Volunteer Application and Profile

NEW APPLICANT UPDATE TO EXISTING APPLICATION

Name: Last _____ First _____ MI _____

Name you prefer to be called: _____ Date of Birth _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: () _____ Second Phone: () _____

Email Address: _____

Emergency Contact Name: _____ Relationship _____

Phone: () _____

My general health condition is: Excellent Good OK Poor

Do you know of any medical condition or physical limitation that may restrict your ability to volunteer?

Yes No If yes, please explain: _____

I have ___ have not ___ been convicted of a misdemeanor, felony, or any hunting or fishing violations.

If yes, please attach explanation of the charge(s) and date they occurred.

If you are related to a DOW staff member please indicate who & relationship: _____

I wish to receive the *Call of the Wild* newsletter via Email Postal mail No newsletter please

What is your T-Shirt size? (please circle one) S M L XL 2XL 3XL

(Volunteers who work more than 25 hours in a year receive a special edition t-shirt)

If you are working on a specific DOW project and do NOT wish to be contacted for any other opportunities, indicate project below, STOP HERE and sign the application on page 3.

Project name or DOW Employee name _____

How did you learn of the Volunteer Program? Current DOW Volunteer DOW Insider DOW Service Center DOW Staff Festival/Booth Website Call of the Wild Newsletter Newspaper Word of Mouth Other

What is the highest level of education you have obtained? High School/GED Associates Degree Undergraduate Degree Graduate Degree Post-Graduate Degree Other

Do you Hunt/Fish? Hunt (big game) Hunt (small game) Hunt (upland birds) Hunt (waterfowl) Angler

In which geographic area(s) would you like to volunteer?
(Check all that apply)

- Northwest Northeast
 Southwest Southeast

INTERESTS:

Check the types of volunteer opportunities you are interested in. Items marked with an * require a background check. Generally, these are projects involving kids, cars or cash.

Aquatic

- Aquatic Research (disease)
- Fish Hatchery Assistance
- Fish Salvage
- Fish Spawning
- General Program Assistance
- Reptile/Amphibian Surveys
- Species Surveys (creel surveys, gillnets, electro-shocking)
- Stocking
- Water Quality Studies

Property Development/Maintenance

- Adopt A State Wildlife area
- Carpentry/Construction
- Clean-up Projects
- Habitat Improvement

Public Information & Education

- *Campground or Wildlife Area Host
- *Front Desk Customer Service
- *Teach Children
- Distribute Wildlife Information

SKILLS:

Please mark any special skills you may have.

Professional

- Computer skills Graphic Design/Artist/Illustration Photography Public Speaking/Presentations
- Teaching Writing/Editing

Trade/Technical

- Construction Heavy Equipment Noxious Weed Spray Cert. Welding/Fabrication Carpentry

Wildlife/Outdoor

- Fish ID GPS Mammal ID Plant ID Reptile/Amphibian ID Wildlife Mgmt/Biology Bird ID
- Camping Hiking/Backpacking

Languages Other Than English? _____

Any additional skill you'd like to share with us? _____



- Regional Assistance
- Staff DOW Booths
- Teach Adults
- Teach Fishing
- Teach Hunting
- Wildlife Education/Interpretation

Support Services

- Area/District Wildlife Mgr Support
- Data Entry
- Office/Clerical
- Regional Assistance
- Volunteer Program Assistance

Terrestrial

- Wildlife – Big Game
- Wildlife – Conservation, Threatened & Endangered
- Wildlife – Transport
- Wildlife – Upland Bird
- Wildlife – Water Fowl

Volunteer Services Agreement

I understand that **before volunteering** I should complete and turn in a self-test from the volunteer handbook (available online), attend a New Volunteer Orientation, or contact my regional volunteer coordinator.

I offer and agree to volunteer my services without compensation to assist the Colorado Division of Wildlife (DOW) in accordance with the following:

- I understand that although this volunteer service will not confer on me the status of a State employee while acting within the scope of this agreement, I will be covered by the **Colorado Governmental Immunity Act (CGIA)** which protects a State employee from liability for injury or damage to others while the employee is acting within the scope of his or her duties.
- The CGIA sets forth situations in which the State will not be liable for acts of a volunteer. If I suffer an injury from an act or omission of action occurring during volunteer responsibilities, the State will provide coverage. If the injury occurs while I am acting **outside** the scope of volunteer responsibilities, or I cause injury through acts of gross negligence, or intentional willful or wanton misconduct, the **State will not afford coverage**. Also the State will not be liable if I compromise or settle a claim without the consent of the State. Lawsuit notification must be submitted to the DOW within fifteen days after the commencement of lawsuit. Finally, when a volunteer fails to notify the DOW of an incident within a reasonable time afterwards, the State will not be liable.
- **I am at least 18 years old**, or if I am less than 18, my parent or guardian consents to this agreement by signing below.
- I understand that Volunteer projects may be outdoors in hazardous conditions (including high elevation) and that I will need to be in the **proper physical condition** for the assigned tasks. I will notify the Volunteer Coordinator of any significant change in my ability to do work or physical activity. If special skills are required for a project, I will be trained before being assigned to that project and I will be expected to use proper safety equipment.
- If an injury occurs while performing duties within the scope of this agreement the State will not be liable for **medical coverage** beyond the Volunteer Insurance Policy. If I feel this coverage is not sufficient, I will provide the excess coverage through a personal medical plan.
- This agreement does not entitle me to operate a **state vehicle** unless specifically authorized. I understand that if I or my minor son/daughter drive my personal vehicle to a volunteer project, I certify that the vehicle is properly insured according to Colorado State Law. My insurance is the primary insurance. The State will not pay for damage to my personal vehicle while it is being used for State business.
- By accepting this agreement, I understand that my application may require a **criminal background investigation** and **driving history check** through state and local law enforcement agencies. All information will be held confidential.
- I understand this agreement may be terminated at any time without cause, by either party, upon advance written notice. **The DOW may terminate this Agreement immediately upon good cause.**

Signature of Volunteer: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____
(if Volunteer is under 18)

Print Name of Parent or Guardian: _____ Relationship to Volunteer: _____

Address & Phone # of Parent or Guardian: _____
(If different than applicant's.)

PLEASE MAIL YOUR COMPLETED APPLICATION TO THE NEAREST OFFICE

CDOW Northeast
Volunteer Coordinator
6060 Broadway
Denver, CO 80216
(303) 291-7369

CDOW Southeast
Volunteer Coordinator
4255 Sinton Rd.
Colo. Springs, CO 80907
(719) 227-5204

CDOW Northwest
Volunteer Coordinator
711 Independent Ave.
Grand Junction, CO 81505
(970) 255-6145

CDOW Southwest
Volunteer Coordinator
415 Turner Dr.
Durango, CO 81303
(970) 375-6704