

Volunteer Application



The LOTT Clean Water Alliance is an equal opportunity employer and does not discriminate in any employer/employee/volunteer relations based on race, color, religion, sex, sexual orientation, national origin, marital status, disability, age, genetic information, veteran's or military status, or any other basis protected by applicable federal, state, or local discrimination laws.



Water Squad volunteers work two-hour shifts at the LOTT Clean Water Alliance's WET Science Center. A volunteer's main role is to greet and assist people in the exhibit gallery. The Water Squad volunteer program is open to people 18 and older, and to high school seniors working on culminating projects.

Please complete this application so that we can discover more about you, your interests, your skills, and your intentions in volunteering at LOTT's WET Science Center.

Please type or print in ink

Name: _____
 Last First Middle
 Address: _____
 Number & Street City State Zip
 Telephone: _____ email: _____
 Home Cell

The WET Science Center is open Monday through Saturday, 10:00 a.m. to 4:00 p.m. Please indicate the times you will be available to volunteer:

	Mon	Tue	Wed	Thu	Fri	Sat
Morning						
Midday						
Afternoon						

Please indicate how many hours per week you would like to volunteer:

Why are you interested in volunteering for LOTT?

Please list useful knowledge, skills, and experience that you have, which will help you work with the general public at LOTT's WET Science Center.

Please list three non-family references:

Name: _____	Primary phone: _____	Secondary phone: _____
Name: _____	Primary phone: _____	Secondary phone: _____
Name: _____	Primary phone: _____	Secondary phone: _____

By signing below, I acknowledge my understanding of, and agreement to, the following:

- I understand that this is an application for and not a commitment or promise of a volunteer opportunity.
- Incomplete, false or misleading statements in my application materials or during my interview will result in immediate rejection of my volunteer application or termination of my volunteer position.
- I understand that I will be volunteering my time and work on WET Science Center programs and therefore will not be compensated monetarily by the LOTT Clean Water Alliance.
- Any volunteer opportunity is contingent upon successful completion of a criminal background check in accordance with the Child and Adult Abuse Information Act (RCW 43.43.830-43.43.845).
- I authorize my references as indicated herein to furnish information, without limitation, concerning my work and/or academic history, reputation, or character, and unconditionally release such references and the LOTT Clean Water Alliance and any representatives thereof, from any and all legal liability for decisions made based on these statements.
- My statements are true, complete, and accurate to the best of my knowledge.
- I am tobacco-free. [] Yes [] No
- I am at least 18 years of age. [] Yes [] No

If no, a parent or guardian must complete the parental permission/release section below.

Volunteer Release

In consideration of voluntary participation by _____ in LOTT WET Science Center
printed name of applicant
programs, I hereby for myself, my heirs, executors, assigns, and personal representatives, forever waive and release any and all claims for damages, loss, or injuries, either to person or property, I now or may hereafter have suffered in connection or arising out of participation in said activities, whether known or unknown, against the LOTT Clean Water Alliance, its elected officials, employees, agents, and volunteer workers.

Applicant Signature: _____ Date: _____

Parental Permission/Release

I, _____, am the parent or legal of said minor volunteer and have authority to enter the
printed name of parent or guardian
release as indicated above on the child's behalf. I further certify that said minor is able to participate in the activities set forth herein without accommodation or with accommodation as agreed upon in advance with the LOTT Clean Water Alliance.

Parental Signature: _____ Date: _____

*Please mail the completed application and disclosure to:
Susie Vanderburg, Environmental Educator
500 Adams Street NE, Olympia, WA 98501*