

Forest Lawn Heritage Foundation
1411 Delaware Avenue, Buffalo, NY 14209
Phone (716) 885-1600 Fax (716) 881-6482
Flc@forest-lawn.com

APPLICATION FOR VOLUNTEER / DOCENT PROGRAM

Name _____

Street _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email Address _____ Are you 21 years or older? Yes No

Education: Highest Year Completed _____ Major _____

Occupation: Past _____ Present _____

If you have worked in any capacity, volunteer or otherwise, list where: [List references on reverse]

What were your volunteer responsibilities?

List any experience you have in teaching or working with groups:

Circle the age level(s) you have worked with:

Children Teenagers Adults Senior Citizens Handicapped

What days of the week would you be able to volunteer (Sundays only for giving tours)?

M T W TH F SA SU

List the time of day you would be available to volunteer: _____

Are there any months that you are not available? _____

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

Yes No

List any skills (i.e. computer, public speaking, fluency in a foreign language, etc.)

In which capacity you would like to volunteer at Forest Lawn? _____

Date _____ Signature _____

REFERENCES
FOREST LAWN'S VOLUNTEER / DOCENT PROGRAM

1) Name _____

Street _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

2) Name _____

Street _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

3) Name _____

Street _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____