



Otter Point Creek Alliance

at the

Anita C. Leight Estuary Center

Chesapeake Bay National Estuarine Research Reserve – Maryland

700 Otter Point Rd. Abingdon, Maryland 21009

Phone: 410-612-1688

Fax: 410-612-0819

www.otterpointcreek.org

Volunteer Application

If you are interested in volunteering at the Anita C. Leight Estuary Center, please fill out this form and return it to the Center. Estuary Center staff or volunteer will contact you to discuss volunteer opportunities.

Volunteer Positions – Please circle the position(s) that interests you.

(A description of each position can be found on our website. Click on the Volunteer button for more details.)

Front Desk Aide

Education Volunteer (school and/or public)

Invasive plant removal

Board Member

Canoe/Kayak Assistant

Plant monitor (SAV, marsh veg., plankton)

Marsh Mucker
(ages 14-18)

Special Event Volunteer (BioBlitz/Wade-In/
Earth Day/Halloween)

Animal Monitor (birds, fish, plankton,
pollinators)

Summer Camp Assistant

Please clearly print the following information:

Today's Date: _____

Full Name (First, Middle, Last) _____

Address _____ City: _____ Zip _____

Date of Birth: _____ Daytime Phone: _____ Cell Phone: _____

Occupation: _____ Email _____

Current Employer: _____ Phone: _____

Personal Reference: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Briefly describe any previous volunteer experience or your interest in volunteering with us: _____

Over

*****STAFF USE ONLY*****

Date App. Rcvd:	Date Contacted:
Interview Date:	Date of Background Check:
Start Date:	Volunteer Packet Rcvd: Y/N

PERMISSION TO PERFORM BACKGROUND CHECK

I hereby authorize Otter Point Creek Alliance (OPCA) to perform a personal background check, including:

_____ Copy of driver's license or state ID card
initial

_____ Criminal Record
initial

_____ Personal Reference
initial

I understand that I do not have to agree to this background check, but that refusal to do will exclude me from consideration for volunteer work.

I understand that information collected during this background check will be limited to what is appropriate for determining my suitability as a volunteer. All such information collected during the check will be kept confidential.

I hereby also give my permission to those individuals or organizations contacted for the purpose of this background check to give their full and honest evaluation of my suitability for the described volunteer work and any other information they deem appropriate.

Signature:_____ Date:_____