

2024 STEM Paleontology, Archaeology, & Geology Summer Camp Volunteer Application



Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Dates and Hours

Camp dates are set annually and are determined by local school calendars and when students are on summer breaks or when the schools offer their summer youth programs. Youth camps in 2022 run from 9 AM to 3 PM on scheduled dates.

Availability

Please tell us which camps you are interested in volunteering for:

Youth STEM Camps: (Youth camps are 3-day day camps that run from 9 AM to 3 PM on Tuesday, Wednesday, and Thursday)

- STEM Youth Paleontology, Archaeology, & Geology Camp A – New Campers (June 25-27, 2024)
- STEM Youth Paleontology, Archaeology, & Geology Camp B – Return Campers (June 25-27, 2024)

Teacher STEM Camps (Teacher camps are 2-day day camps that run from 8 AM to 4:00 PM on Saturday & Sunday)

- STEM Teacher Paleontology & Archaeology Camp (May 4-5, 2024)
- STEM Teacher Geology Camp – (May 18-19, 2024)

Interests

Tell us in which area(s) you are interested in volunteering?

- Camp Nurse (1)
- Classroom Assistant (1)
- Dry Screening Activities (3)
- Drying Rack Activities (1)
- Field Excavation Site Assistant (3)
- Instructor (2)
- Instructor's Assistant (2)
- Lunch and Break Assistant (1)
- Mock Dig Box Assistant (4)
- Storage Room Assistant (1)
- Volunteer Coordinator (1)
- Wet Screening Activities (2)

Special Skills or Qualifications

Are you a teacher that has completed the WMF's Teacher STEM Paleontology, Archaeology and Geology Camp?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Year: _____	<input type="checkbox"/> Virtual Class	<input type="checkbox"/> Dig Site Class
------------------------------	-----------------------------	-------------	----------------------------------------	-----------------------------------------

COVID 19 PANDEMIC GUIDELINES

The WMF values the health of all our volunteers and participants. The WMF follows WA State and CDC Health and Camp Guidelines.

Please answer the following:

I have had my Covid vaccine shot(s) No Yes Name of vaccine: _____

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

--

Previous Volunteer Experience

Summarize your previous volunteer experience.

--

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I also understand that for the safety of our volunteers and participants, background checks are required on all volunteers.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us. Please complete the WMF Background Check Authorization. We will let you know when we receive the report.

CONFIDENTIAL

Wenas Mammoth Foundation Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____ Driver's License Number/State: _____

Email Address: _____

Have you ever been convicted of a crime? No Yes If yes, please explain: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize **the Wenas Mammoth Foundation** and its designated agents and representatives to conduct a comprehensive review of my background producing a background check report to be generated for volunteer purposes. I understand that the scope of the background check report may include but is not limited to the following areas: verification of social security number; current and previous residences; employment history, education background, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **the Wenas Mammoth Foundation**, or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release the **Wenas Mammoth Foundation**, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____