## **Docent Application**

## **Contact Information:**

Name _				
	(First)	(Middle)	(Last)	
Address				
	(Street)	(City)	(Zip)	
Best phone	number to reach you	()		
E-mail addr	ress			
Emergency	Contact:			
Name		Relationship		
Home phor	ne	Cell phone		
·				
Employme	nt:			
Current em	nployer	Position		
Past emplo	yer	Position		
Education:				
Area or fiel	d of study			
What organ	nizations do you belon	g to		
List your pa	ast/present volunteer o	experience		

<b>Check all that apply:</b> What interests you most:				
Work with the public	I am comfortable handling live animals			
Work with children	I like to handle live animals			
Work with special needs	guests I like to work special events			
Availability:  What days of the week do you prefer to work  What hours of the day do you prefer to work  How many hours per month can you commit to				
Skills:				
Other Docent Experience				
Teaching Experience				
Foreign Languages				
Artistic Ability				
Public Speaking Skills				
Special Interests/Hobbies				

## Please return this application to:

Dennis Dinwiddie
Director of Education and Conservation
Topeka Zoo and Conservation Center
635 SW Gage Blvd
Topeka, KS 66606
785-383-6784
ddinwiddie@topeka.org