



**Morris Arboretum of the
University of Pennsylvania**

Official arboretum of the Commonwealth of Pennsylvania

Volunteer Application

Date: _____

Name: _____
Last First Middle Initial

Address: _____

Best contact number: _____ home ____ business ____ cell ____

Email: _____

Are you a Morris Arboretum member? Yes ____ No ____

How did you hear about our volunteer program? _____

Which volunteer program(s) are you interested in? Please see full descriptions on the website.

What is the highest education you attained? high school ____ college ____ graduate school ____

What is your current or previous profession? _____

Please list any special interests, hobbies and skills: _____

Do you, or have you, volunteered elsewhere in the last 2 years? Yes ____ No ____

If yes, where? _____

Please describe any medical, physical or other concerns which would limit the type of activities you are able to perform?

Have you ever been convicted, pled no contest, or pled guilty to a felony or misdemeanor?

Yes ____ No ____

All volunteers working with children must submit to a background check and fingerprinting, paid for by the Morris Arboretum. Are you willing to do so? Yes ____ No ____

Thank you for your interest in becoming a Morris Arboretum volunteer.

Please complete this form and email to the contact listed under your area of interest or mail to:

Morris Arboretum Volunteer Application 100 East Northwestern Ave. Philadelphia, PA 19118