



Boise Environmental Education Program - Foothills Learning Center

Mailing address:
1104 Royal Blvd.
Boise, ID 83706

Physical location:
3188 Sunset Peak Road
Boise, Idaho

(208) 493-2530

www.BoiseEnvironmentalEducation.org

TDD/TTY 1-800-377-3529

Dear Boise Environmental Education Program Volunteer Applicant,

Thanks for your interest in volunteering for the Boise Environmental Education Program at the Foothills Learning Center. Volunteers are essential to sharing our message of stewardship. You are clearly a person who cares deeply about our environment, and sharing that passion with children can be richly rewarding.

Youth Volunteers, age 14 and under, are welcome to volunteer. Depending on maturity level, we may request parent/guardian chaperoning and involvement.

To visit the Learning Center, follow 8th Street north, go 1/3 mile past the end of the pavement.

Training is required for all volunteers because we work with children and are representing the City of Boise. Length of training depends on the programs in which you will participate. *All selected volunteers* will be subject to a background check & fingerprinting.* A volunteer application form follows this letter. Please print the form, complete it and mail or drop off at the Foothills Learning Center.

Programs & Volunteer Opportunities include:

- On-site Environmental Education*
- School classroom Environmental Education*
- Service Learning*
- Second Saturday Programs
- Lesson preparation
- Garden maintenance

If you have any questions, please feel free to call the BEE Program at 493-2530.

Best Regards,
Jennie Rylee, Boise Environmental Education Coordinator

Volunteer Application

Date: _____

Name: _____
 Last First Middle Initial

Email: _____

Address: _____
 Street City State Zip Code

Phone: _____
 Home Work Cell/Pager

EMERGENCY CONTACT

Name Relationship Phone

Why would you like to volunteer for the BEE Program?

REFERENCES

Please give us contact information of two people who can speak to your abilities as a volunteer for the Foothills Learning Center.

Name #1 Relationship

Address Phone number

Name #2 Relationship

Address Phone number

Describe any training, skills, and/or experience that you may want to put to work as a volunteer for the BEE Program.

AVAILABILITY

Please check the boxes below that represent what days and hours you would be available.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evenings							

Is there anything about your schedule we should know?
