



CONSERVATION
SOCIETY OF
CALIFORNIA

CONSERVATION & EDUCATION
OAKLAND ZOO

Teen Wild Guide Program Application

Mail or bring in to: Katie Garchar, Oakland Zoo
Post Office Box 5238 Oakland, CA 94605
Phone: (510) 632-9525 x207
Email: kgarchar@oaklandzoo.org

Please turn in together:
This Application completed in full
One 500-800 word essay
Two letters of recommendation from adults other than a relative

PLEASE PRINT ALL INFORMATION

Name _____ Age _____ Gender pref. _____

School Name _____ Grade you are in now:

Date of Birth (MM/DD/YY) _____ 8th 9th 10th 11th 12th

Mailing Address _____ Phone Numbers:
Home: _____

City, state & zip _____ Work: _____

Cell Phones: _____

E-mail Address _____

ESSAY

On a separate page, please answer the following questions in one 500-800 word essay:

1. Why do you want to be a Teen Wild Guide at the Oakland Zoo's Valley Children's Zoo?
2. What do you wish to gain from your experience as a Teen Wild Guide?
3. Why would you be an excellent Teen Wild Guide?

Can you commit to volunteering one shift/week (summer session) or two shifts/month (school year session)?

Yes _____ No _____ If no, please explain _____

Will you have reliable transportation to/from the zoo? Yes _____ No _____
If no, please explain:

Activities Interests & Hobbies

At school:

Away from School:

How long do you see yourself participating in the TWG program? Long-term or short-term?

Please describe any previous experience you have had as a volunteer.

By applying for a position as a Teen Wild Guide and being accepted into the program, I understand that I am/my teen is:

1. Being asked to interview with a representative of the program to answer my questions and be asked questions, after which I may or may not be accepted into the program. I can also decide at that time that I do not want to participate in the program.
2. Required to pay a non-refundable \$80 fee if I am accepted into the program (\$60 if I am a Zoo Member).
3. Expected to complete all required training.
4. Expected to volunteer a minimum of one full-day shift/week for the summer session, or two full-day shifts/month for the school year session.
5. Expected to have a **current TB test completed** and provide proof of clearance before beginning to volunteer.

Teen Signature _____ Date _____

Parent/Guardian Signature _____ Date _____