



North Carolina Aquarium at Pine Knoll Shores Volunteer Dive Program Application

Name _____ Date ____/____/____

Address _____

City _____ State _____ Zip _____

Age (Minimum age 18) _____ Birthdate: ____/____/____

Home phone _____ Work phone _____

Mobile phone _____ E-mail _____

Position Applied for Volunteer Diver Volunteer Dive Program Assistant (NON-DIVING)

Spouse's Name (for future membership purposes) _____

Education:

Highest level of education completed (High School, college, graduate school, etc.)

_____ Graduated: ____yes ____no

Degree/diploma (if applicable) _____ Major _____

Other training or certification _____

Work Experience:

Occupation (If retired, give most recent paid employment) _____

Current Employer / Position _____

Are you a student? _____ Institution: _____

Diver Certification and Experience:

Highest level of recreational certification _____

Date of certification _____ Number of logged dives _____ Date of last dive _____

IMPORTANT: You must pass a NC Aquarium dive physical before participating in this program. The required commitment for this program is one full day (9 AM - 4 PM) once every two weeks, for a minimum of one year.

PLEASE CIRCLE THE DAY OR ALL DAYS YOU ARE AVAILABLE TO VOLUNTEER						
SUN	MON	TUE	WED	THU	FRI	SAT
AND PLACE A CHECK IN THE BOX BELOW THE DAY(S) YOU MOST PREFER						

Volunteer Experience:

Organization and dates of volunteering _____

Responsibilities _____

Have you ever been convicted of an offense against the law other than a minor traffic violation?

Y/N If yes, please explain _____

(Conviction does not necessarily preclude an applicant for volunteer positions.)

References: All references should be professional, academic or community, and someone who is not related to you or living with you.

1. Name _____ Relationship _____

Address _____ Phone _____

2. Name _____ Relationship _____

Address _____ Phone _____

Acknowledgment:

I certify that the statements made in this volunteer application are true and correct, and I have not knowingly withheld any information. If the information provided in this document is found to be untruthful, I understand that I will be released from the volunteer program. I authorize verification of all information contained in this application and grant permission for references to be contacted.

I understand that I will not be paid for my services as a volunteer, and that filling out an application for the program does not guarantee acceptance into a volunteer position.

I understand that as a volunteer at the North Carolina Aquarium, I will be expected to demonstrate a serious commitment to uphold the mission of the Aquarium, to maintain an environment of integrity for people and the animals, and to focus on customer service, with respect for all employees, volunteers and guests. I agree to follow all Aquarium guidelines and policies.

Signature _____ Date _____

North Carolina government policy prohibits discrimination based on race, sex, color, creed, national origin, age or disability.

Mail to: Steve Broadhurst – Dive Safety Officer and Volunteer Dive Program Coordinator
North Carolina Aquarium at Pine Knoll Shores, P.O. Box 580, Atlantic Beach, NC 28512

E-mail to: Steve Broadhurst – steve.broadhurst@ncaquariums.com

** Upon receipt, an e-mail reply will be sent to you, followed by periodic updates.*

