



Madras Crocodile Bank Trust/Centre for Herpetology

Volunteer Application

Please read the following carefully before you start your filling your application form.

1. The applicant should be >18 years old.
2. Candidates will be selected through a Skype interview.
3. Candidates will be notified about their selection.
5. Please note an unsigned application will not be considered.
6. We request you to scan the application form and send via email in a PDF format.

Personal details:

Name:

First name

Last Name

Middle Name

Date of Birth:

Marital Status:

Gender: Male Female (Please tick)

Occupation:

Current job responsibility:

Please attach your
passport size
photo here

Contact details:

Address:

Phone:

*NOTE: Do not list any numbers you do not wish to be contacted at

Valid E-mail Address: (mandatory)

Language proficiency:

Speaking: Tamil/ Hindi/ English/ Other (specify)_____

Reading/Writing: Tamil/ Hindi/ English/ Other(specify)_____

Academic qualifications:

(With majors at Bachelors, Masters, PhD level wherever applicable)

Degree/Course	Institution

Skills & Experience:

Please describe your experience/skills related to ecology and conservation and/or captive husbandry and care. Please elaborate on:

Organization	Duration	Position	Brief description of duties/work

Describe the beginnings and development of your interest in this field (minimum 100 words)

Describe any skills/abilities/experience you have that might be valuable to the Croc Bank (eg: writing, computational skills, teaching, technical skills, etc).

Describe why you have chosen to volunteer at MCBT and in what ways you think it will benefit you?

Preferred dates for volunteering (See program chart)

From:

To:

Diet: Vegetarian/ Non-Vegetarian/Vegan/Vegetarian but eat egg

Important Medical History

1. Please state any information you wish to share with us regarding your health and medical needs.
2. Please specify if you are allergic to any substance, food or medicine
3. If you are currently under any medication, please mention all details. *Ensure that it is carried with you.*
4. Have you had a Tetanus Vaccine recently? Y/N: _____ (You must be covered by a tetanus shot during your volunteer periods).

Emergency Contact Person:

Relationship to you:

Contact number:

VOLUNTEER POLICY (TERMS AND CONDITIONS)

Please read the following carefully before signing the document.

Please note: Volunteer duties may include activities under the following categories:

Education & interpretation, community & outreach, maintenance activities, special interest projects

1. I will follow the rules and regulations of MCBT.
2. I hereby declare that I am a volunteer and I will provide my services free of cost and will not expect any monetary returns in exchange.
3. I will be an active member of the volunteer team during my stay at MCBT.
4. I will not expect to be an employee of MCBT in return for the services I provide to them as a volunteer.
5. I will not speak to anyone in the media directly at any point of time during my time as a volunteer with MCBT.
6. I will not release any crucial information or pictures to any source (social networking sites on internet, press, and media) without explicit permission from MCBT staff.
7. I will provide a copy of all my photographs/ videos to MCBT.
8. I will behave in an acceptable and responsible manner.
9. I am aware that MCBT has the authority to terminate my position based on my performance.
10. I will respect the rights, dignity and culture of others during my time as a volunteer.
11. I will perform all the tasks provided during the volunteering duration and recognize that the tasks will be undertaken only with MCBT staff supervision.
12. I will not plan any sightseeing activities during the volunteering duration.
13. I will not collect or handle flora or fauna on the campus.
14. I will not take part in any activities that can put MCBT staff in a difficult situation.

I hereby state that the information provided is accurate and up to date to the best of my knowledge. I accept full responsibility for any contingency/ injury borne by me in the field or during my stay at MCBT and will not hold MCBT, its staff, contractors or personnel responsible. I have gone through the above stated policy carefully and I will abide by the points mentioned.

Signature

Date