

Education Docent Program

Would you like to . . .

- Learn about animals and the natural world?
- Help people learn new ideas and how to relate to wildlife?
- Become active in your environment?
- Develop valuable leadership skills?

If so, then the Montgomery Zoo/Mann Museum Docent program may be just what you're looking for.

Montgomery Zoo Docents must show . .

- A long lasting interest in wildlife and the environment.
- The desire and ability to teach others.
- A commitment to the training process and volunteering at least eight hours per month throughout the year.

Requirements to Become a Docent:

An applicant must:

1. be at least 18 years of age (*No exceptions*).
2. have an exceptional interest in animals and the environment.
3. make a six month commitment as an educational volunteer.

If selected he/she must:

1. attend one of the four training sessions offered this year.
2. work a minimum of eight hours each month throughout the year.
3. attend and participate in monthly docent meetings.
4. report results from a TB test within two months of acceptance.
5. adhere to all rules and regulations imposed by the zoo, Mann Museum and the department of education.
6. be responsible for purchasing the training manual and at least one short sleeve uniform shirt (\$40.00) and will be responsible for having your name embroidered on all uniform shirts.
7. be responsible for providing their own uniform pants and shorts while in service. (khaki or black pants or shorts, shorts cannot be any higher than 3 inches above the knee.)



To Apply

1. Applicant must complete this application in full.
2. Applicant must indicate session preference on application.
3. Application must be turned in by deadline for preferred session (see dates below)
4. Applicant must provide two reference letters which must be submitted with application.
5. Every part of the application is important, as the materials will be reviewed as a whole.
6. Deliver completed application to: Department of Education, Montgomery Zoo
PO Box 3313
Montgomery, Alabama 36109
or fax it to (334) 240-4916

Important Dates

Application Deadlines

January 23rd by 4:30 pm

May 1st by 4:30 pm

August 7th by 4:30 pm

October 30th by 4:30 pm

Session

for February 9th session

for May 18th session

for August 24th session

for November 16th session

Interviews

February 2nd

May 3rd & 4th

August 17th

November 9th

Philosophy of Live Animal Use in Education Programs

It is the mission of the education department of the Montgomery Zoo to promote awareness, education, preservation, conservation and participation in wildlife and wildlife habitats throughout the world.

The zoo education department provides live animal educational programs and events to stress the importance of conserving wildlife and the habitats where wildlife resides as well as to help prevent the extinction of endangered species through education.

The zoo education department strives to increase interest in science and animal husbandry and to teach students responsibility and respect for our environment.

The zoo education department provides our community with a wide variety of educational resources and prides itself on being stewards of the environment. The zoo education department's mission is based on its commitment to deliver accurate information to the public and to promote an increased awareness of the natural world around us.

I am applying for the following session: (check 1)

____ February 9th (deadline is Jan 23rd)

____ May 18th (deadline is May 1)

____ August 24th (deadline is Aug 7)

____ November 16th (deadline is Oct.30)

Must have application turned in by deadline.

Name: _____

Date of Birth: _____ Age: _____

Level of education completed: _____

Home #: _____ Work #: _____ Other #: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

What languages are spoken in the home? _____

Employer: _____ Employer's mailing address: _____

City: _____ State: _____ Zip: _____

How did you hear about the Docent program? _____

Brief Medical History (optional)

Name of physician/Clinic: _____

Phone Number: _____ City: _____

Allergies: (to food, drugs, insects, etc.) _____

Other known medical conditions: _____

Emergency contact persons:

1. Name: _____ 2. Name: _____

Relationship: _____ Relationship: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Don't forget to include two reference letters with your application!!

Signature

Date