



NEW JERSEY
AUDUBON
SOCIETY

New Jersey Audubon Society's
**IMPORTANT BIRD AND BIRDING AREAS (IBBA) PROGRAM
VOLUNTEER INFORMATION SHEET**

Adopt-an-IBA Today!!

Print out this form, complete and mail to address at end of form.

Contact Cristina Frank, IBBA Coordinator, with questions at (609)861-0700 or

cristina.frank@njudubon.org. For more information about the IBBA Program and our activities at Important Bird Areas (IBAs), please visit the IBBA Website <http://www.njudubon.org/Conservation/IBBA/>.



1. General Information

Name _____ Affiliation _____
Address _____
City _____ State _____ Zip _____ County of Residence _____
Date of Birth _____
Home Phone _____ Daytime Phone _____
Email Address _____
Preferred Method of Contact _____

2. Project interests (Circle)

Data entry: some experience with computers necessary, MS Access users also needed

GIS/Mapping: experience with handheld GPS unit and/or GIS/mapping programs including ArcView 3x and ArcMap

Habitat restoration activities(removal of vegetation, planting, bird boxes, etc): willingness to work in sometimes wet/buggy conditions

Trail/site maintenance(trash cleanup, signage, trail repair): willingness to work in sometimes wet/buggy conditions

Habitat monitoring/Vegetation surveys: some experience with plant identification may be required

Bird monitoring: some experience with bird identification may be required

Threat monitoring(surveying site use, habitat changes, invasive species, etc): willingness to work in sometimes wet/buggy conditions

Volunteer leader: requires experience working with volunteers and leading groups

3. Availability and Experience

What area of NJ do you prefer to work in?

City _____ County _____ Region _____
IBAs (Important Bird Areas) _____

What days are you available? (Circle)

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

How many hours per month are you willing to contribute? (Circle)

2hrs 4hrs 6hrs 10hrs 15hrs More than 15hrs Other _____

Describe relevant job experience.

DATE	EMPLOYER	JOB DESCRIPTION

Describe volunteer experience.

DATE	ORGANIZATION	ACTIVITIES

4. Skills List your skills/certifications/education. Explain if necessary.

Computer (software, typing, web design, etc): _____

Identification (vegetation, bird, etc): _____

Degree(s): _____

Certification(s): _____

Training: _____

Other: _____

Describe any physical limitations that may affect your duties as a volunteer.

5. References

List a reference, preferably not a relative, who can be contacted to verify your qualifications.

NAME	ADDRESS	EMAIL	PHONE

Name of person to contact in case of emergency.

NAME _____ RELATION (parent, spouse, etc) _____

Home Phone _____ Cell Phone _____ Work Phone _____

6. Where did you learn about volunteering for the NJAS' IBBA Program? (Circle)

IBBA Website *Newspaper* *Friend* *Other:* _____

Signature of Applicant _____ Date _____

MAIL COMPLETED FORM TO:

Cristina Frank
 IBBA Program
 New Jersey Audubon Society
 600 Route 47 North
 Cape May Court House, NJ 08251

Thank you for your interest in NJAS' Important Bird and Birding Areas Program!!

**Adopt-an-IBA
Today!**