



Perth Zoo  
Docent Association

Personal Information

# 2020 APPLICATION TO BECOME A PERTH ZOO DOCENT

PLEASE PRINT CLEARLY IN BLOCK LETTERS

Title: \_\_\_\_\_ Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Date of birth: \_\_\_/\_\_\_/\_\_\_ Are you a Zoo Friend member? Yes  No

Do you have a current Australian Driver's Licence? Yes  No

Contact Details

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone (H): \_\_\_\_\_ (W): \_\_\_\_\_ (Mobile): \_\_\_\_\_

E-mail address: \_\_\_\_\_

Confirm E-mail: \_\_\_\_\_

Availability

You are required to do two duty days per month, would you prefer (please circle)

Weekdays - Mon Tues Wed Thurs Fri Weekends - Sat Sun

**Please note:** The cost of the course is \$100 and includes your first year's membership. (Annual membership is at present \$50)

Skills & Experience

Employed full-time  Employed part-time  Between employment

Studying full-time  Studying part-time  Retired

Occupation/Previous Occupation \_\_\_\_\_

List other volunteer experience (if any)  
\_\_\_\_\_

Do you enjoy working with:

Children/Families  Seniors  Overseas Visitors  People with Disabilities

Are you reasonably fluent in languages other than English? Yes  No

If yes, please specify: \_\_\_\_\_

Police Clearance

Are you willing for the Docent Association to obtain a Police Clearance on your behalf?

Yes  No

Motivation

Why do you want to become a docent? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Please turn overleaf

