

## VOLUNTEER APPLICATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Age (check one)  13-17\*  18-24  25-39  40-55  55 and up

*\*Children are eligible to volunteer, however must be accompanied or supervised by an adult.  
Guardians must sign volunteer application.*

Emergency Contact \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Overall availability – generally, what is your availability to volunteer? (daily/weekly/monthly)

\_\_\_\_\_

Which volunteer role is most interesting to you?

- Volunteer Coordinator
- Special Event Assistant
- Administrative Assistant
- Special Projects/Committee Assistant
- Facilities Assistant
- Artist Demonstrator/Narrator
- Education Assistant
- Museum Assistant

Do you have any experience/skills in the following categories? Please check all that apply.

Experience/Skill	Summary of experience	Level of proficiency
<input type="checkbox"/> Teaching/education		
<input type="checkbox"/> Public speaking		
<input type="checkbox"/> Glassblowing, ceramics, other art/craft		
<input type="checkbox"/> Clerical/Administrative		
<input type="checkbox"/> Maintenance		
<input type="checkbox"/> Customer service		
<input type="checkbox"/> Gardening/weeding		
<input type="checkbox"/> Event planning		
<input type="checkbox"/> Fundraising		
<input type="checkbox"/> Database entry		
<input type="checkbox"/> Volunteering		
<input type="checkbox"/> Fluency in another language		
<input type="checkbox"/> Other _____		
<input type="checkbox"/> Other _____		
<input type="checkbox"/> Other _____		

Are you willing to submit to a background check?  Yes  No

Please provide two personal references.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Contact number

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Name

\_\_\_\_\_  
Contact number

\_\_\_\_\_  
Relationship

How did you hear about the WheatonArts volunteer program?

What do you hope to gain from this experience?

## Volunteer Agreement

I, \_\_\_\_\_, certify that the information provided in this application is correct and complete to the best of my knowledge. I understand that my participation with WheatonArts is completely voluntary and either I or the organization can terminate this agreement at any time.

To attain full volunteer status, volunteers must donate 20 hours a year. Benefits for active volunteers include discounts in the Museum Shops and free admission.

After completing 100 volunteer hours, you will earn a complimentary Make Your Own Paperweight experience. After completing 250 volunteer hours, you will earn a complimentary Sustaining Membership (includes the North American Reciprocal Museum Program). After completing 500 volunteer hours, you will earn a complimentary Make Your Own Vessel experience.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of guardian (if under 18)

\_\_\_\_\_  
Signature of WheatonArts Representative

\_\_\_\_\_  
Date