

Application for Volunteer Service

			Date: / /
Name			Home Phone ()
Address			Work Phone ()
City	State	Zip	Cell Phone ()
Email			

Why are you interested in volunteering at the Anchorage Museum?

Community Involvement School Project
 Work Experience Corporate Volunteer Program
 Other (please explain) _____

Types of Volunteer Work

EDUCATION AND PUBLIC PROGRAMMING	OTHER
<input type="checkbox"/> Docent-led tours	<input type="checkbox"/> Collections
<input type="checkbox"/> Public Programs or Education Events	<input type="checkbox"/> Atwood Resource Center
<input type="checkbox"/> Gallery Guides	<input type="checkbox"/> Museum Shop
<input type="checkbox"/> Hands-On Carts or activities	<input type="checkbox"/> Concierge/Info Desk
<input type="checkbox"/> Live Animal Handling	<input type="checkbox"/> Administrative Support
<input type="checkbox"/> Curriculum Writing and/or Training	
<input type="checkbox"/> Administrative Support	

Please rate in preference of interest (1-3)

_____ ART _____ HISTORY _____ SCIENCE

Hours Available

Monday-Friday (10am-2pm)
 Afternoons (2pm-6pm)
 Evenings (6am-9pm)
 Weekends (10am-6pm)

Educational Background

High School Diploma or GED Yes No

Undergraduate Studies
 Name of College/University _____ Major[s] _____ Currently Enrolled Yes
 No

Application for Volunteer Service

Graduate Studies

Name of College/University _____ Major[s] _____ Currently Enrolled Yes
 No

Professional Background

Currently Employed? Yes No

If yes, current place of employment:

If you are retired or not currently employed, please list your last place of employment.

Additional relevant work experience (please List):

Previous Volunteer Experience

Please List:

Your Experience is valuable to us. Please check any of the following that pertain to you.

- | | | |
|--|--|---|
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Costume Design | <input type="checkbox"/> Language _____ |
| <input type="checkbox"/> Web Design | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Fine Arts |
| <input type="checkbox"/> Crafts | <input type="checkbox"/> Photography | <input type="checkbox"/> Other _____ |

Availability

Approximate Total Hours Per Week:

Days:	Evenings:	Weekends:
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Certification

I certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I understand that any misrepresentation or material omission of the application will result in my being eliminated from further consideration. I further understand that, if accepted, any misrepresentation on written applications or in interviews that becomes known to the Anchorage Museum may result in immediate removal from the Volunteer Program.

I agree that I offer my services as a volunteer with no expectation of monetary compensation and I fully understand that I will be required to attend an orientation, customer service training, and department specific training.

The Anchorage Museum may utilize public records through the State of Alaska Court System website (ORCA) and/or the Dru Sjodin National Sex Offender website in the processing of volunteers. Information regarding volunteer applicants found on either website will be disclosed to the individual if it results in their application being rejected (rejection of an application because of this information and subsequent disclosure does not provide opportunity for appeal of the rejection decision). The Anchorage Museum may also elect to utilize additional background research resources as deemed appropriate.

Applicant's Signature	Date
Printed Name	Date

Please remit application to:

**Volunteer Coordinator
Anchorage Museum
625 C St.
Anchorage AK 99501
emahaffey@anchagemuseum.org**

PHONE: 907-929-9297

FAX: 907-929-9290