

TAM *Volunteer Application*

GENERAL INFORMATION PLEASE COMPLETE ALL FIELDS

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____ Birthday _____

VOLUNTEER QUESTIONNAIRE

What is your past work experience? Are you retired?

Do you have any previous volunteer experience? Yes/No (If yes, please give details.)

Why do you want to become a volunteer at TAM?

What other commitments do you have that may affect the time you can give to TAM?

VOLUNTEER QUESTIONNAIRE CONT.

What are your personal interests and hobbies?

What special skills or education will you bring to TAM?

Do you have an interest or skill in any of the following?

- | | |
|--|--|
| <input type="checkbox"/> Docent/Front Desk | <input type="checkbox"/> Tour Assistant |
| <input type="checkbox"/> Educational Assistant | <input type="checkbox"/> Clerical |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> Carpentry/Painting/Display Assembly |
| <input type="checkbox"/> Gift Shop/Retail | <input type="checkbox"/> Building Grounds Maintenance |

How much time are you able to give to TAM?

Weekly _____ Monthly _____

What times are you available? (*AM- 10AM - 2PM, PM- 2PM - 5PM*)

TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM

Are you able to volunteer on a “regular” or on an “as required” basis?

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VOLUNTEER QUESTIONNAIRE CONT.

Please provide details of two people we can contact (work supervisor, teachers, tutors etc.) and an emergency contact.

	FULL NAME	ADDRESS	CONTACT
REFERENCE 1			
REFERENCE 2			
EMERGENCY CONTACT			

Do you have any medical conditions that would affect your volunteer work? Yes/No (If yes, please give details.)

Date you can begin _____

SIGNATURE _____ **DATE** _____

Send completed form to our Business Manager, Jessica Hull Livesay, at jhull@theartmuseum.org, or return in person to TAM.

