



Volunteer Application

(PLEASE PRINT LEGIBLY)

Personal Information

Today's Date _____

Name (First & Last) _____

Address: _____

City: _____ St/Zip: _____

Home Phone: _____ Cell phone: _____

Birthday: ____/____/____ Email: _____

Preferred contact method: Phone Email Either

Are you a citizen of the United States? Yes No

Are you authorized to work in the US? Yes No

Have you ever been convicted of a felony? Yes No If yes, explain: Briefly on the line. _____

Have you ever worked for this company before? Yes No If yes, when? _____

Date available: _____ Desired volunteer position: _____

Education

High School: _____ Graduation year: _____

Tech School: _____ Graduation year: _____

College/Higher Ed: _____ Degree(s)/Year: _____

Work or Volunteer Experience:

Position: _____ Company: _____

Supervisor: _____ Phone/email: _____

Address: _____

Start Date: _____ End Date: _____

Responsibilities and achievements: _____

Position: _____ Company: _____

Supervisor: _____ Phone/email: _____

Address: _____

Start Date: _____ End Date: _____

Responsibilities and achievements: _____

Position: _____ Company: _____

Supervisor: _____ Phone/email: _____

Address: _____

Start Date: _____ End Date: _____

Responsibilities and achievements: _____

**Experience, achievements, certifications, skills or qualifications relevant to
desired position:**

1. _____

2. _____

3. _____

Please check areas of expertise or interest:

- | | | |
|--|---|---|
| <input type="checkbox"/> Dinosaurs/Fossils | <input type="checkbox"/> Pre-Hispanic America | <input type="checkbox"/> US Presidents |
| <input type="checkbox"/> Geology | <input type="checkbox"/> Africa | <input type="checkbox"/> Civil War |
| <input type="checkbox"/> Mesopotamia | <input type="checkbox"/> Asian/Indian Culture | <input type="checkbox"/> Wars after WWI |
| <input type="checkbox"/> Ancient Egypt | <input type="checkbox"/> Medieval/Renaissance | <input type="checkbox"/> Other |
| <input type="checkbox"/> Ancient Greece/Rome | <input type="checkbox"/> Revolutionary War | |

Please check all volunteer opportunities that interest you:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Tour Guide | <input type="checkbox"/> Marketing | <input type="checkbox"/> Front Desk |
| <input type="checkbox"/> Docent | <input type="checkbox"/> Development | <input type="checkbox"/> Greeter |
| <input type="checkbox"/> Exhibits Research | (fundraising) | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Exhibit Construction | <input type="checkbox"/> Educational | <input type="checkbox"/> Other |
| <input type="checkbox"/> Collections | Programming | |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Special Events | |

Please indicate all the days and times when you are available to volunteer

Days	Hours Available
<input type="checkbox"/> Monday	_____
<input type="checkbox"/> Tuesday	_____
<input type="checkbox"/> Wednesday	_____
<input type="checkbox"/> Thursday	_____
<input type="checkbox"/> Friday	_____
<input type="checkbox"/> Saturday	_____
<input type="checkbox"/> Sunday	_____

How many hours per week are you interested in volunteering? _____

Note: Regular volunteers are expected to work at least 40 hours per year.

Are you interested in helping out with special events on nights and weekends?

_____ Yes _____ No

We will try to place you where you would like to be but cannot guarantee those positions will be available.

References:

Name _____ Relationship: _____

Phone/Email: _____

Name _____ Relationship: _____

Phone/Email: _____

Name _____ Relationship: _____

Phone/Email: _____

I hereby certify that the above information is correct to the best of my knowledge and I understand that this is **NOT** an application for paid employment and all time given is strictly voluntary. I also authorize the Museum of World Treasures staff to contact my references.

Signature of Applicant

Date

(Print Clearly)

I, _____, hereby authorize the Museum of World Treasures to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. The Museum of World Treasures may utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application to volunteer will not be processed further.

Signature of Applicant

Date

You can drop your application off at the front desk at the museum from 10am-4:30pm, email it to volunteer@worldtreasures.org, or mail it to the following address: 835 E. 1st Wichita, Kansas 67202. For any questions call (316) 263-1311.