Shelburne Museum Volunteer Application 2020



Full Name:		Nickname:		
Street Address:				
City:	_ State:	Zip Code:		
Telephone:	Email:			
Is this a seasonal address?	If so, what	months are you available?		
Are you 18 years or older?	Yes No			
Skills & Hobbies Skills (data entry, bookkeeping, foreig	gn languages, carper	ntry, sewing, quilting, gardening, CF	'R, etc)	
Other interests, hobbies, activities	es:			
Education & Experience Volunteer Experience(s):				
Employment background:				
Educational background (Please in	ndicate highest level co	mpleted):		
Personal Reference:				
Volunteer interests: Ch	neck all areas of i	nterest that apply:		
Administrative/office wor	'k (bulk mailings, dat	a entry, etc.)		
Buildings (carpentry, paintii	ng, etc.)			
Collections Managemen	t/Registrar's Offic	e		
Conservation (occasional	data entry, clerical w	ork)		
Gardening and/or Lands	caping			
Greeter (2-hour shifts, outsi	de the Store)			
Special events (Circuspale	ooza, Haunted Happ	enings, First Free Fridays.)		
Quilt Demonstrating (or re	ug hooking, or other	craft:	_)	
Education (Webby's Studio	, Owl Cottage, etc.)			
Other: please describe				

	Availability
•	Do you expect to volunteer:
	Less than 25 hours per season
	25 or more hours per season
•	Do you prefer to volunteer:
	A regular schedule each week (i.e. every Thursday afternoon)
	Occasional dates throughout a season (i.e. Circuspalooza, Auto Festival)
	On a short-term project
•	Please circle when you are available: May - Oct. Nov - April All Year
•	Please list any days of the week / times of day you are always unavailable:
	Additional Questions
•	Why would you like to volunteer at Shelburne Museum?
•	Do you have any special needs and/or requirements?
•	Will you need Museum acknowledgement of your hours for United Way, a school, or another organization?
•	Have you ever been convicted, imprisoned, been on probation, parole or under
	supervision as a result of a conviction, or been fined for any violation of the law?
	If "yes" give dates, details, and penalties for each occurrence on an attached sheet of paper. An answer of "yes" to this question does not constitute an automatic bar on volunteering.
•	Additional Comments:
	I certify that answers given in this application are true and complete to the best of my knowledge. I authorize investigation of all statements contained herein and the reference listed above to give you any and all pertinent information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing same to you.

Signature_____