



For office use only: Placement \_\_\_\_\_

Volunteer Coordinator (860) 231-2830 ext. 38  
950 Trout Brook Dr., West Hartford, CT 06119-1437  
Fax (860) 232-0705, www.thechildrensmuseumct.org

## Application for Student Volunteer Service

Date of application: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name (*please print*): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Best time to contact you: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please print your *first* name as you would like it to appear on your badge: \_\_\_\_\_

### Education

Current school: \_\_\_\_\_ Grade Level: \_\_\_\_\_

### References

Please give one reference form to a teacher or school counselor and the other to a non-relative who has known you at least one year.

Please list any previous work or volunteer experience (indicate W or V):

<i>Employer</i>	<i>Job Title/Responsibilities</i>	<i>Dates</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have any hobbies, skills, science projects or special interest? Please tell us about them:

\_\_\_\_\_  
\_\_\_\_\_

Why would you like to volunteer at The Children's Museum?

\_\_\_\_\_  
\_\_\_\_\_

Please list any medical restrictions, requirements, and allergies you would like us to be aware of:

\_\_\_\_\_

Do you have access to reliable transportation? \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Days/times you are available to volunteer (please check morning or afternoon and write times for each day of the week you may be available): **Museum Hours are Tuesday through Saturday from 9 am until 4 pm and on Sundays from 11 am until 4 pm. We are closed on Mondays except for school holidays and during the summer.**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Total hours you would like to volunteer per week: \_\_\_\_\_

Please circle all areas that interest you and number your choices in order (#1 = first choice/most interested in):

- |                        |                       |                             |
|------------------------|-----------------------|-----------------------------|
| Administrative Support | Explore Store         | Roaring Brook Nature Center |
| Buildings and Grounds  | Travelers ScienceDome | Science Demos/Activities    |
| Camp-Ins               | Guest Relations       | Special Events              |
| Computers              | Preschool             | UTC Wildlife Sanctuary      |
| Education              |                       |                             |

Are you available on short notice to help with special events or projects? \_\_\_Yes \_\_\_No

How did you learn about volunteer opportunities at The Children’s Museum?

\_\_\_\_\_

Have you ever been convicted of a crime? Yes\_\_\_ No\_\_\_

Have you ever been suspended or dismissed for alleged or actual acts of physical or sexual abuse? Yes\_\_\_ No\_\_\_

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Interviewer’s Signature/Date

\_\_\_\_\_  
Signature of parent or Guardian (if under 16)

\_\_\_\_\_  
Other Interviewer

The Children’s Museum is an Equal Opportunity Employer and all applicants will be given consideration for positions regardless of race, creed, color, sex, or age.