



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 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 (please list any degrees and/or majors)

References (please list people who have known you more than one year and are not relatives, at least one should be a current or former employer if possible)

1. _____
Name *Address* *Phone* *Relationship*

2. _____
Name *Address* *Phone* *Relationship*

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

Employer *Job Title/Responsibilities* *Dates*

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 Sunday 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 suspended or dismissed from an organization as a result of alleged, suspected or actual acts of physical or sexual abuse? Yes____ No____

Have you ever been convicted of any crime, including sexual and child abuse related crimes? Yes____ No____

Applicant's Signature

Date

Interviewer's Signature/Date

Other Interviewer