



National Museum of the Great Lakes

1701 Front St. Toledo, OH 43605

419.214.5000 • nmgl.org



Volunteer Application

Date: _____ Are you a Museum Member: Yes No Are you at 18 years of age: Yes No

Name: _____
First M.I Last

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email address: _____
(Preferred form of communication)

Emergency Contact: _____
Name/Relationship Phone Number

ARE YOU VOLUNTEERING FOR SERVICE HOURS DUE TO EDUCATION OR JOB REQUIREMENTS?

School/Organization

Program Name

Reason for service hours

How many service hours do you plan to do? _____ Date you need them complete by: _____

WILL YOU BE VOLUNTEERING ON A TEMPORARY BASIS?

If a volunteer opportunity can be found for you, what date can you start?

What would be your last date of volunteering?

What is your availability:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
AM / PM	AM/PM	AM/PM	AM/PM	AM/PM	AM/PM	AM/PM

How many hours a week would you like to volunteer? _____

Current Employer: _____ Job Title: _____ Retired: Yes No

High School: _____ Year Graduate(d): _____

College: _____ Degree: _____ Year Graduate(d): _____

Graduate School: _____ Degree: _____ Year Graduate(d): _____

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Areas of Interest: Gallery Attendant Docent Special Events Research/Publications Fundraising Education
 Maintenance Landscaping Administrative Marketing Restoration Projects

Special Requests: _____

Volunteer History: (Please list the organization, position held and dates volunteered) _____

How did you hear about our program? _____

Referral name if applicable: _____

WHY DO YOU WANT TO VOLUNTEER WITH US? _____

Applicant Agreement and Signature:

I certify that the information contained in this application is correct to the best of my knowledge. I understand that false or misleading information is grounds for refusing to accept me as a volunteer or will result in immediate termination if offered a volunteer position.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for a volunteer position. I also authorize the Museum or its agent to conduct any background or reference check, including but not limited to previous employment, education, criminal convictions, and credit records.

In consideration for my volunteer status, I agree to abide by the policies and regulations of the Museum, which policies may be changed, withdrawn, added or interpreted at any time, at the Museum's sole option and without prior notice to me. I also acknowledge that should I be offered a volunteer position with the Museum, I may be terminated, or any offer withdrawn, at any time, with or without cause, and with or without prior notice at the option of the Museum or myself.

I understand that any offer of a volunteer position will be contingent based upon reports satisfactory to the Museum.

Signature

Date

NMGL OFFICE USE ONLY

Min. Req. _____ Min. Not Met: _____ Interview Date: _____

Gallery Attendant Docent Special Events Research/Publications Fundraising Education
 Maintenance Landscaping Administrative Marketing Restoration Projects

Additional Notes: