

# Taube Museum of Art Volunteer Application



Application date \_\_\_\_\_ (Please print clearly)

Volunteer positions applying for: Date available to start \_\_\_\_\_

Gallery Assistance  Artist Receptions  Children's Classes  Fundraisers

Committees  Board Member  Adult Classes  Other \_\_\_\_\_

## • PERSONAL INFORMATION •

Name \_\_\_\_\_ Daytime Telephone (\_\_\_\_) \_\_\_\_\_  
Last, First, Middle Initial

Address \_\_\_\_\_ Evening Telephone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

How did you learn of the Taube Museum of Art? \_\_\_\_\_

Hours desired: \_\_\_\_\_ per day \_\_\_\_\_ per week \_\_\_\_\_ per month \_\_\_\_\_ per year

Availability to volunteer (circle all that apply)

Mornings: 9:00 AM to 1:00 PM      Tues. Wed. Thur. Fri. Sat.

Afternoons: 1:00 PM to 5:00 PM      Tues. Wed. Thur. Fri. Sat.

Evenings: 5PM – 10 PM (special events)      Tues. Wed. Thur. Fri. Sat.

Interests and experience: (I) = Interest (E) = Experience

Office Work       Teaching       Host/Greeter       Public Speaking       Grant Writing  
 Grant Research       Phone Calls       Event Planning       Photography       Graphic Arts  
 Bulk Mailings       Newsletter       Art Making Activities       Marketing       Fundraising  
 Other \_\_\_\_\_

## • VOLUNTEER HISTORY •

Are you under age 18? \_\_ No \_\_ Yes

If yes, a parent or guardian must accompany you during your assignment, unless other arrangements have been made.

Do you have prior volunteer experience? \_\_ No \_\_ Yes — Please begin with your most recent organization

• Organization \_\_\_\_\_ City & State \_\_\_\_\_ From \_\_\_\_\_  
Mo. Yr.  
 Position \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_ To \_\_\_\_\_  
 Service Performed \_\_\_\_\_ Reason For Leaving \_\_\_\_\_

• Organization \_\_\_\_\_ City & State \_\_\_\_\_ From \_\_\_\_\_  
Mo. Yr.  
 Position \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_ To \_\_\_\_\_  
 Service Performed \_\_\_\_\_ Reason For Leaving \_\_\_\_\_

Please list any additional skills, experiences, honors, awards, special licenses, certifications, community and volunteer activities you feel may be helpful to us as a volunteer.

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• **GENERAL INFORMATION** •

The Taube Museum of Art is an equal opportunity employer. It is the policy of this organization to encourage individuals to participate in the volunteer programs without discrimination based on race, color, sex, national origin, religion, marital status, disability, age, or sexual orientation.

• **APPLICANT'S CERTIFICATION AND AGREEMENT** •

Please Read Carefully Before Signing: I authorize the organizations listed to give the Taube Museum of Art information concerning my information covered by this application. I release all parties from all liability for furnishing information. My permission is given to the Taube Museum of Art to request and release this information. I certify that all information provided in this volunteer application is true and complete. I understand that if I am accepted as a volunteer with the Taube Museum of Art it is on an "at will" basis which means that either the Taube Museum of Art or I may terminate my volunteer relationship at any time. I understand that this application and other documents which, I may receive are not contracts of employment. I am volunteering my services without anticipation of pay or regular employment and without displacing any paid employees. I understand that acceptance as a volunteer is based on the combination of my interests, skills, and the needs of the Taube Museum of Art. I certify that I have read and agree with the statements mentioned above.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

(If under 18 years old)