



Volunteer Application

We are pleased to have you volunteer at the Children's Museum.
We appreciate your willingness to share your time, talents, and energy with us.

We are looking forward to working with you!

Please complete and return this form to Christina Knudsen, Project Director.

207 5th Ave S La Crosse, WI 54601 . (608) 784-2652 x226 . christina@funmuseum.org www.funmuseum.org

General Information: (please print)

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Date of Birth: _____

E-Mail: _____

Do you prefer to be contacted by: Home phone Cell E-mail Postal mail

(Volunteer opportunities and updates are sent via email unless specified otherwise.)

Education / Employment:

Current School / College: _____ Current Grade Level: _____

List any degrees or certifications: _____

Clubs: _____

Current Employer: _____ From _____ - _____ To _____ - _____

Position Title: _____ Duties: _____

Volunteer Summary:

Please check one:

Volunteer (no required hours to fulfill)

Required volunteer work

What are hours required for:

Class

What Class? _____ # of hours required: _____ Completion Date: _____

Group

What Group? _____ # of hours required: _____ Completion Date: _____

Community Service (ask for reference form)

of hours required: _____ Completion Date: _____

Letter Recipient Information:

Name: _____ Home Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Please circle when you are available: Mornings Afternoons Evenings Weekends

Certain hours? _____

Volunteer Summary (cont):

How did you hear about the CMLC volunteer program? _____

Why do you want to volunteer for CMLC? _____

Please check your specific skills / interests (add any not listed):

Sewing	Plumbing	Finish Carpentry	Electrical
Drawing	Scale Design	Photography	Graphic Art
Electronics	Mechanics	Rough Carpentry	Painting Walls
Clerical	Marketing	Computer work	Fundraising
Welding	Painting Murals	Making Signs	Scale Model construction
Other: _____			

There are many things to do at the museum that are not listed on the "Current Volunteer Opportunity" list. We will work with everyone to find an area that interests you. New volunteer opportunities are always being developed. If you have a particular skill, interest or hobby you would like to share with our staff and/or visitors please contact us!

Volunteer Experience:

Organization: _____ Are you currently volunteering? Y N

Address: _____ City: _____ State: _____ Zip: _____

Position: _____ Duties: _____

Organization: _____ Are you currently volunteering? Y N

Address: _____ City: _____ State: _____ Zip: _____

Position: _____ Duties: _____

References:

Please list two personal references (other than family members & who are at least 18 years of age):

1. Name: _____ Relationship: _____ Phone: _____

Address: _____ City: _____ State/Zip: _____

2. Name: _____ Relationship: _____ Phone: _____

Address: _____ City: _____ State/Zip: _____

Have you ever been arrested, charged, or convicted of a crime? No Yes

If yes, Explain: _____

Authorization: I certify that the facts in this application correct and complete to the best of my knowledge. I understand that false information shall be grounds for dismissal from the CMLC volunteer program. I authorize CMLC to check and verify all information on this application.

Signature _____ **Date** _____**Parent or guardian Signature** _____ **Date** _____

(If volunteer is under age 18)

Emergency Contact Information

Emergency Contact: _____ Relationship _____ Phone _____

Preferred Hospital: _____ Medical Conditions _____

Allergies: _____