



BUTLER INSTITUTE OF AMERICAN ART VOLUNTEER APPLICATION

Personal Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____

Date of Birth: Month _____ Day _____ Year (Optional) _____

Occupation: _____ Employer: _____

Work Phone: (____) _____

Emergency Contact Name: _____ Phone #: (____) _____

Education:

Highest Degree Earned: _____ Major field of study: _____

If you are still in college, please indicate if you are:

Undergraduate: What year? _____ Major: _____

Graduate: What year? _____ Major: _____

If you are still in high school, please indicate your current grade: _____

Special Skills:

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing as a volunteer.

Please list if you have experience in:

- Microsoft Word
- Microsoft Excel

What would you like to gain from your volunteer experience?

Previous Museum (or related) Experience:

Availability:

Please list the days and times that you are available. The Butler Institute of American Art is open Tuesday-Saturday 11 am -4 pm and Sunday 12 pm to 4 pm.

Days and Times:

	Tuesday	Wednesday	Thursday	Friday	Saturday		Sunday
11-1:30						12-4	
1:30-4							

References:

Please list names of two people not related to you who will provide references.

Name	Relationship	Phone/Email
1. _____		
2. _____		

Commitment:

The Museum Gift Shop requires volunteers to contribute a minimum of 2 shifts per month. Training and an interview are required before beginning your volunteer position. Signing up for a shift on the volunteer schedule means you are committing to that day and time.

Signature: _____ **Date:** _____