



Virginia Museum of
NATURAL HISTORY

IN ASSOCIATION WITH THE SMITHSONIAN INSTITUTION

Volunteer Application

Date: _____

Last Name: _____ First Name: _____

Preferred Name: _____ Date of Birth: _____

Street Address: _____

Zip Code: _____ City: _____ State: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Educational Background:

Name	Location	Level Completed	Degree
High School: _____			
College or University: _____			
Graduate Study: _____			

Employment Information:

Current Occupation: _____

Employer: _____ Position: _____

Past Employment:

Employer	Position	Years of Service
(1) _____		
(2) _____		
(3) _____		

Emergency Contact:

Name: _____ Phone Number: _____

Relationship: _____

Special Training (CPR, Business, Trade, etc.): _____

Fluent in any foreign languages? _____

References: (List three persons not related to you who know your qualifications)

Name	Address	Phone	Relationship
(1) _____			
(2) _____			
(3) _____			

Have you ever been convicted of a law violation(s), including moving traffic violations but excluding offenses committed before 18 years old, which were finally adjudicated in a Juvenile Court or under a youth offender law?

_____ Yes _____ No *If Yes, please explain* _____

(All applications may be subject to background check)

General Questions:

1. Hobbies and Areas of General Interest.

2. Do you have previous volunteer experience?

3. Indicate your reasons why you want to volunteer in Virginia Museum of Natural History.

4. How did you learn about our volunteer program?(online, friends, etc.)

Availability:

Time	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Morning							
Afternoon							

When can you start? _____

How many times would you like to volunteer per week? _____

Preferred Type of Volunteer:

Work	Education/ Tour Guide	Exhibits/Marketing	Office/Mailings	Gift Shop/ Cafe	Special Events
1 st Choice					
2 nd Choice					
3 rd Choice					

SIGNATURE: _____ **DATE:** _____

*Please fill in all of the requested information and return by fax to (276) 634-4199 or mail to:
Volunteer Office, Virginia Museum of Natural History, 21 Starling Ave., Martinsville, VA, 24112*

*If you have any questions or comments concerning volunteering please contact
Rhonda Casey, Human Resources Manager at (276) 634-4158 or by email at rhonda.casey@vmnh.virginia.gov*

Office Use Only

Supervisor: _____

Assigned Duties: _____