

Children's Museum of New Hampshire Volunteer Application

Name _____ Date _____

Phone _____ Email _____

Mailing address _____

Birthday (month & day only) _____

School (if applicable) _____

Office Use Only Start date: _____ Shift: _____ Photo: _____
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Do you need a required number of hours for class/school?
Yes No How many? _____

Why do you want to volunteer at the Children's Museum of NH?

How did you hear about volunteering at the Children's Museum of NH?

List any previous experience working with children, families or with the public:

Do you have any special interests/skills/super powers we should know about?

Check any/all below that you feel comfortable doing:

- | | | | |
|---|--|--|------------------------------------|
| <input type="checkbox"/> working with art materials | <input type="checkbox"/> office tasks | <input type="checkbox"/> computers | <input type="checkbox"/> gift shop |
| <input type="checkbox"/> answering phones | <input type="checkbox"/> fixing things | <input type="checkbox"/> data entry | |
| <input type="checkbox"/> working w/people w/special needs | <input type="checkbox"/> face painting | <input type="checkbox"/> sewing | |
| <input type="checkbox"/> leading games/activities | | <input type="checkbox"/> interacting with children | |

Do you prefer to volunteer: regular weekly shift special events both

Please indicate your availability:

- | | | | | |
|------------------------------------|---|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Monday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |
| <input type="checkbox"/> Thursday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |
| <input type="checkbox"/> Friday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> 5pm – 8pm (once/month) |
| <input type="checkbox"/> Saturday | <input type="checkbox"/> 10am – 1pm | <input type="checkbox"/> 1 – 4pm | <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |
| <input type="checkbox"/> Sunday | <input type="checkbox"/> 10am – 12pm (once/month) | <input type="checkbox"/> 12 – 3pm | or <input type="checkbox"/> 2 – 5pm | <input type="checkbox"/> other |

Who can we call for a reference? Name: _____

ph/email _____ Relationship to you: _____

I agree to honor my commitment to my scheduled volunteer shift, _____