



1400 Inspiration Place
Cedar Rapids, IA 52404
319.362.8500
www.NCSML.org

Today's Date: _____

VOLUNTEER & INTERN APPLICATION

Full Name: _____ Birthday: _____

Address: _____

Phone #: (Home) _____ (Cell) _____

Email: _____

How would you prefer to be contacted? Cell Phone Home Phone E-mail

Emergency Contact Info:

1) Name _____ Phone: _____ Relationship: _____

2) Name _____ Phone: _____ Relationship: _____

Please indicate how you would like to volunteer: (Please check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Museum Gallery (gallery attendant, PM gallery closer) | <input type="checkbox"/> Financial (filing, data entry) |
| <input type="checkbox"/> Immigrant Home Tours (guided tours) | <input type="checkbox"/> Development (data entry, filing, member mailings/calls) |
| <input type="checkbox"/> Library (reference desk, filing, special projects) | <input type="checkbox"/> Administrative (filing, phone answering) |
| <input type="checkbox"/> Grand Hall Host (greet/direct visitors) | |
| <input type="checkbox"/> Education (school tour guide) | <input type="checkbox"/> Marketing/Communications (design, social networking, outreach, advertising, projects as assigned) |
| <input type="checkbox"/> Programs/Events (craft leader, event assistant) | |
| <input type="checkbox"/> Other | |

List any other special hobbies/interests to share, such as in crafts or hobbies; musical or artistic talent; working with youth or adults; computers; organizational expertise or mastery in other skill-sets?

Do you have any past or current volunteer experience? If so, please list the organization and job description:

What days and times are you available? *Regular Museum hours are 9:30 am – 4 pm Monday-- Saturday and 12 pm – 4 pm Sunday.*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9:30 am – 1 pm							
1 pm – 4 pm							

- Call me for special events Yes No
- Do you enjoy working with youth in grades K – 6? Yes No
- Do you enjoy working with youth in grades 7-12? Yes No
- Do you have experience working with the public? Yes No
- Do you have skills with computers/Microsoft Office? Yes No
- Are you currently a museum member? Yes No
- Are you currently a member of another museum? Yes No
- Due to Covid-19 – are you willing to maintain a clean and sanitized work space? Yes No
- Are you willing to follow the museum’s rules & guidelines? Yes No
- Are you willing and able to follow specific instructions for tasks given to you by staff when present for your shift? Yes No

Are you volunteering to fulfill a service requirement? Yes No

If yes, number of hours required: _____. Please list the name and title, along with the phone number of the person to whom you report your service hours:

Personal References (Not related to you)

1. _____

Name
Phone Number
Relationship

2. _____

Name
Phone Number
Relationship