



VOLUNTEER APPLICATION

Name _____ Home phone _____ Cell phone _____

Email _____ City _____

Emergency contact _____ Phone _____ Age _____

Amount of completed education:

High school Two-year college Four-year college Graduate school Doctorate

Area of interest:

Studio Gallery Development Administration Management Artist Services

Board of Directors Movement Classes Special Project (please explain)

Approximately how many hours per work are you available to volunteer? _____

Are you available to drive artists and staff on field trips? _____

If so, how many people can you transport? _____

Do you have any artworld experience? _____

If so, doing what and for how long?

Do you have any experience with the disabilities communities? _____

If so, please explain.

Are you certified in first aid? _____

Have you ever been convicted of a crime? _____

Please list any other experiences, skills or experiences you can share with us: