

Baxter • Cleburne • Fulton • Independence • Izard • Jackson • Marion • Poinsett • Sharp • Stone • White • Woodruff

Volunteer Docent Application

Please print:	Date:					
Name:	E-mail:					
Home phone:	_ Cell phone					
Address:	_ City: Zip					
Age Date of Birth//						
Parent or Guardian's signature (if under 1	8)					
Check all that apply:						
Student Employed Retired	Other					
References-Please provide 3 character references.						
Name	Contact number					
Name	Contact number					
Name	Contact number					
I have never been charged or convicted o	f a crime other than minor traffic violations.					

Times you are available:							
	Tues	Wed	Thurs.	Fri	<u>Sat</u>		
Mornings- 9:00am-1:00pm							
Afternoon 1:00pm-5:00pm							
State how many days per week/month you would like to work: (we request at least one shift per month)							
List your volunteer experience, special skills, or abilities.							
Are you comfortable using a computer	r?						
Do you enjoy working with kids?							
Would you be interested in learning/leading special programming?							
Volunteer Code of Conduct Agreement expected to treat your supervisors, con your cell phone down while volunteer is prompt for your shift and let staff know will be the only one scheduled for that request you dress business casual; not maintain a neutral work environment. preferences with visitors or coworkers	oworke ing and w in a t time o short Please	ers, and d excus dvance frame s s, swea	visitors e yourse if you n so it imp ets, tank	with pelf before to the contract of the contra	professionalism. Please turn fore answering. Please be to be absent. In most cases you to for you to be there. We or strapless attire. We strive to		
Signature:							
If you are under 18, please provide: A	\ge	Dat	e of Birt	h/			
Parent or Guardian's signature:							

Mail or bring application to: Old Independence Regional Museum 380 S. Ninth Street Batesville, AR 72501

Attn: Docent Coordinator