

Metropolitan Arts Council

Volunteer Application

All information will be treated confidentially. Please answer all questions as completely as possible. The use of this form does not necessarily indicate that volunteer positions are open nor does it constitute an offer or a contract of placement. Please print clearly.

General Applicant Information

Name (Last,First,Middle Initial): _____

Title: (circle one) Mr. Mrs. Ms. Email: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Address: _____ City: _____ Zip: _____

If under 18, please list your age and date of birth: _____

Driver's License #: _____ Exp. Date: _____ State: _____

Emergency Contact Information

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Address: _____ City: _____ Zip: _____

Educational Background

High School (Name): _____ Graduated? _____

Business/Vocational School: _____ Graduated? _____

Degree: _____

College: _____ Graduated? _____

Degree: _____

Graduate School: _____ Graduated? _____

Degree: _____

Availability

Please indicate your availability and preference for your volunteer time (circle all that apply):

Flexible-anytime

Monday	AM	PM	Tuesday	AM	PM
Wednesday	AM	PM	Thursday	AM	PM
Friday	AM	PM	Saturday	AM	PM
Sunday	AM	PM			

Skills:

Please check all skills in which you have had at least one year of experience:

- | | | |
|---|--|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Communications/Public Relations | <input type="checkbox"/> Database Mgr. |
| <input type="checkbox"/> Fund raising | <input type="checkbox"/> Human resources | <input type="checkbox"/> Trainer/Educator |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> Volunteer Management | <input type="checkbox"/> Receptionist |
| <input type="checkbox"/> Foreign Language Fluency (please list languages) _____ | | |

Other: _____

*You may attach a resume to further outline your skills/areas of expertise.

Volunteer Interest Areas

Please check all areas in which you would be interested in volunteering:

- Photography
- Fund raising
- Data Entry
- General Clerical
- Other Manual Skills
- Letter writing
- Hand-addressing Envelopes
- Special Events-Logistics
- Other – List any other special talents that you have: _____
- Musical Performance
- Public Relations
- Envelope stuffing/Mailings
- Public Speaking
- Article Writing
- Website updates
- Volunteer Management
- Arts in the Schools
- Graphic Design
- Filing
- Receptionist
- Carpentry
- Grant Writing
- Telemarketing
- Strategic Planner

Some volunteer jobs may require physical strength and stamina. Are you able to perform these types of tasks? (Circle one) YES NO

Our expectation is that volunteers will commit to at least 1 year of service. If you are unable to make this commitment, please indicate how long you can volunteer with MAC:

Please indicate any professional licenses that you hold:

Type/Number: _____ Exp. Date: _____ Status: _____
Type/Number: _____ Exp. Date: _____ Status: _____

References

Please list two people, other than family, who know your qualifications and/or background:

Name: (Last, First) _____
Home Phone: _____ Work Phone: _____
Address: _____ City: _____ Zip: _____

Name: (Last, First) _____
Home Phone: _____ Work Phone: _____
Address: _____ City: _____ Zip: _____

Have you ever been convicted of a felony? (Circle one) YES NO

The following information is being requested in the event that a background check is necessary. Volunteers working with any MAC programs involving children are subject to a background check.

Date of Birth: _____ Previous Last Name: _____
Gender (circle one): Male Female Social Security #: _____
Ethnic Group: African American/Black Caucasian/White Hispanic/Latino
Asian/Pacific Islander Native American Other _____

I hereby give The Metropolitan Arts Council permission to inquire into my educational background, references, driving record, police records and employment and/or volunteer history. I further give my permission to the holder of any such information or records to release the same to the Metropolitan Arts Council.

I do hereby hold The Metropolitan Arts Council harmless from any liability, whether civil or criminal, that may arise as a result of the release of this information about me. I further hold harmless any individual, agency, business or corporation that provides information as part of its verification of my volunteer application and periodically for evaluation purposes.

I certify that the information given herein is true and correct to the best of my knowledge and belief. I understand that providing false information on this application may be grounds for denying my application or for terminating my services as a volunteer.

Applicant's signature: _____ **Date:** _____
Parent/Guardian Signature when applicant is under 18 years of age: _____
_____ **Date:** _____

Optional Volunteer Information

All volunteers are considered for all positions and treated without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition, or disability. The information in this box is used to determine the diversity of Metropolitan Arts Council volunteers and if requested, may be provided to foundation and federal funding organizations, such as the National Endowment for the Arts.

Circle Appropriate Categories:

Sex: Male Female

Marital Status: Single Married

Work Status: Employed Unemployed Retired Student

Ethnic Group: African American/Black Caucasian/White

 Asian/Pacific Islander Hispanic/Latino

 Native American Other

Age: _____ Date of Birth: _____