

**MIDDLETOWN ARTS CENTER
VOLUNTEER APPLICATION FORM**

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE

Name: _____ (Last, First, Middle)	
Present Address: _____ (Number, Street, City, State, Zip Code)	
Home Phone: (____) _____	Social Security Number: _____
Cell Phone: (____) _____	TRANSPORTATION
How will you get to your assignment?	
<input type="checkbox"/> Walk <input type="checkbox"/> Bus/Van/Taxi <input type="checkbox"/> Personal Car	
E-Mail: _____	

Education Background: <input type="checkbox"/> High School Grad <input type="checkbox"/> Trade School <input type="checkbox"/> Some College <input type="checkbox"/> College Grad	
Schools Attended: _____	Major: _____
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please explain: _____ _____	
Have you had any prior work and/or volunteer experience? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please provide the names of the organizations and dates you were employed or volunteered your services: _____ _____ _____ _____	
Note: The Middletown Arts Center reserves the right to perform background checks.	

Days/Hours Available		
<input type="checkbox"/> No Preference	<input type="checkbox"/> Wednesday	How many hours can you work weekly? _____
<input type="checkbox"/> Monday	<input type="checkbox"/> Thursday	Can you work evenings? _____
<input type="checkbox"/> Tuesday	<input type="checkbox"/> Saturday	When are you available? _____
<i>(Note: The Center is not normally open on Fridays and Sundays, and is closed Saturdays during the Summer).</i>		
Prior volunteer experience: _____		
Prior experience with Middletown Arts Center: _____		
Volunteering Interests:		
<input type="checkbox"/> Receptionist (greet visitors, answer phone, provide information to prospective students and visitors, etc.)		
<input type="checkbox"/> Help with Committee projects (see attached list of committee activities).		
<input type="checkbox"/> Help with Fundraising. <input type="checkbox"/> Help prepare promotional and informational materials.		
<input type="checkbox"/> Assist with grant writing. <input type="checkbox"/> Assist with exhibits and special events.		
<input type="checkbox"/> Other: _____		

Please list two (2) references other than relatives living with you:

Name: _____

Name: _____

Telephone: _____

Telephone: _____

Relationship: _____

Relationship: _____

How Long: _____

How Long: _____

I certify that all statements I have made on my application are true and correct and I hereby authorize the Middletown Arts Center to investigate the accuracy of this information. I understand that I am working at all times on a voluntary basis, without monetary compensation or benefits, and not as a paid employee. As a Middletown Arts Center volunteer, I give the Middletown Arts Center permission to use any photographs or videos made of me during my service without obligation or compensation to me. I understand that the Middletown Arts Center reserves the right to cease a volunteer's services at any time.

The Middletown Arts Center is a 501(c)(3) non-profit organization.

Signature _____ **Date** ____/____/____