

**The Great Bend Museum**

1 Wall St, Ravenswood WV 26164

304-273-1999 | museum@cityofravenswood.com

**Volunteer Application**

Thank you for your interest in volunteering with us! Once this application is submitted, the Great Bend Museum will be in touch with you to set up a time to meet and to share more information about volunteer opportunities. You'll then be invited to attend an introductory training session which is mandatory before you can start volunteering in an area.

*This form must be fully completed to be considered. All information provided is confidential.*

Date:

# **Personal Information**

Full Name:

Address/C/S/Z:

Phone: May we text you about your shifts? Yes / No

Email:

School (if a student):

Do you have any allergies? Yes / No

Will you require any disability accommodations to volunteer with us? Yes / No

 If yes:

**How did you hear about us?**

\_\_\_\_\_ Facebook

\_\_\_\_\_ Friend or Family Member

\_\_\_\_\_ School

\_\_\_\_\_ Great Bend Museum Website

\_\_\_\_\_ Newspaper

\_\_\_\_\_ Community Fair/Festival

**Demographic Information**

*This information is needed for AmeriCorps recordkeeping and many funding opportunities. It is optional to include and will not affect status of your application.*

Date of Birth:

Gender: Ethnicity:

Are you a college student enrolled in a degree-seeking program? Yes / No

Are you a veteran, military member, or in an active duty military family? Yes / No

# **Availability**

*The Volunteer Program is an essential element to the daily running of the Great Bend Museum. Volunteering at the museum involves a commitment of time and effort as outlined in the Volunteer Handbook.*

**Select all that regularly apply:**

**Days:** Tuesday Wednesday Thursday Friday Saturday No Preference

**Times:** 10-11 11-12 12-1 1-2 2-3 3-4 4-5 Evenings (uncommon)

Why do you want to volunteer at the Great Bend Museum?

# **Education**

Highest degree/level completed:

Last school attended:

Did you graduate? If yes, when?

What was your area of study?

# **Skills, Interests, & Experience**

*Please let us know your personal, academic, and professional experiences, interests, and skills for opportunities based on these backgrounds.*

\_\_\_\_\_ Antiques

\_\_\_\_\_ Archaeology

\_\_\_\_\_ Art/Art Education

\_\_\_\_\_ Clerical/Data Entry

\_\_\_\_\_ Collections Mgmt

\_\_\_\_\_ Construction

\_\_\_\_\_ Crafts

\_\_\_\_\_ Education

\_\_\_\_\_ Fundraising

\_\_\_\_\_ Gardening

\_\_\_\_\_ Genealogy

\_\_\_\_\_ Gift Shop/Retail

\_\_\_\_\_ Graphic Design

\_\_\_\_\_ Local History

\_\_\_\_\_ Photography

\_\_\_\_\_ Research

\_\_\_\_\_ Social Media

\_\_\_\_\_ Technology

\_\_\_\_\_ Tour Guide/Docent

\_\_\_\_\_ Writing/Editing

\_\_\_\_\_ Youth Engagement

\_\_\_\_\_ Other:

I am passionate about:

I am happy to help with:

I want to learn how to:

Please don’t ask me to:

I thought you should also know:

# **Languages**

*Do you speak any language other than English (ex: Spanish, ASL)?*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Volunteer Experience**

Name of previous volunteer location:

Name of previous volunteer supervisor:

Previous supervisor’s contact information:

Previous volunteer responsibilities/job:

# **Employment (if applicable)**

Current/Most recent job title:

Current/Most recent place of employment:

Current/Most recent supervisor:

Current/Most recent employment contact information:

# **Criminal History**

*Certain volunteer areas may require a criminal background check.*

Have you ever been convicted/pled guilty to a crime other than a traffic violation? Yes / No

If yes, please describe:

# **References**

*Please provide one reference (not a relative).*

Name:

Relation to you:

Address:

Phone: Email:

Occupation:

# **VOLUNTEER AGREEMENT**

As a Great Bend Museum Volunteer, I agree to the following:

* I will perform my volunteer duties to the best of my ability, according to the position description.
* I will maintain the confidentiality of all information I may encounter at the Museum, including names, addresses, phone numbers and all personal information in our database or in our files.
* I will complete any required trainings for my position and will attend volunteer orientations and meetings when possible.
* I will keep my contact information current & complete all required paperwork in a timely manner, including time sheets and data forms about my volunteer interests.
* If I cannot follow through on a commitment to volunteer, I let the Museum Director know at least 24 hours in advance (when possible) so that a substitute may be found.
* I understand as a volunteer, I will not receive any financial compensation for any work or services I perform at or for the Great Bend Museum.
* I will treat all people with dignity and respect. I will be open to people of all ages, races, sizes, faiths, abilities, gender expressions, sexual orientations, and economic and cultural backgrounds.
* I understand that no Great Bend Museum staff member, volunteer, or member of a governing body may compete with the GBM for collections or may take advantage of privileged information received because of his or her position relevant to the GBM’s collecting scope. Should a conflict of interest develop between the needs of the individual and the GBM, those of the GBM will prevail.
* I understand that I am not an employee of the City of Ravenswood, West Virginia, the City of Ravenswood Board of Parks and Recreation Commissioners, the City of Ravenswood Board of Culture and History, or the Great Bend Museum; and that I will not be compensated in any way nor will I be afforded any employment benefits for the time I volunteer for the said entities.

**By submitting this form, I certify that the facts in this application are true, correct, and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for dismissal from the Museum Volunteer Program.**

I do further covenant and agree, for myself, my heirs, my assigns, and any other such parties who may now or in the future assert any legal right on my behalf or who may assert any right by virtue of any legal or contractual relationship between such third party and myself, to hold harmless and release the City of Ravenswood, West Virginia, the City of Ravenswood Board of Parks and Recreation Commissioners, the City of Ravenswood Board of Culture and History, and the Great Bend Museum, from any and all such claims for any bodily injury or death or any other legal claim which I may have against the said entities while serving as a volunteer..

**I authorize the Museum to check and verify all information on this application. In order to perform due diligence in protecting the well-being and safety of those we serve, the Museum reserves the right to perform criminal background checks on any current employee, applicant or volunteer. I fully release references, employers, and the Museum from any liability from the verification process.**

Name (Print)

Signature

Date

# **TALENT RELEASE FORM**

I hereby assign and grant to the Great Bend Museum, Ravenswood Board of Culture and History, the Ravenswood Board of Parks and Recreation Commissioners, and the City of Ravenswood, the right and permission to use and publish the photographs/film/videotapes/ electronic representations and/or sound recordings made of my name, likeness or image during any event, volunteer activity, employment, affiliation or the like associated with the Great Bend Museum.

I hereby release the Great Bend Museum, Ravenswood Board of Culture and History, the Ravenswood Board of Parks and Recreation Commissioners, and the City of Ravenswood from all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of Great Bend Museum, Ravenswood Board of Culture and History, the Ravenswood Board of Parks and Recreation Commissioners, and the City of Ravenswood.

I specifically waive any right to any compensation I may have for any of the foregoing.

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Name (Print)

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Signature

Date

Application witnessed by:

Signature:

Date