



Date received: _____

Workman and Temple Family Homestead Museum
Volunteer Staff Application

Name: _____ Birthdate: _____

Address: _____ City, State: _____ Zip: _____

Home phone: _____ Work phone: _____

Cell phone: _____ E-mail: _____

How did you hear about the Homestead's volunteer program? _____

Why are you interested in volunteering at the Homestead? _____

Do you have other volunteer experience? Yes No If yes, please list organizations: _____

Tell us about your special interests and/or hobbies: _____

Are you in school? Yes No If yes, what school? _____

Do you need community service hours for school or a club? Yes No If yes, how many? _____

Are you fluent in any languages other than English? Yes No If yes, what language(s)? _____

I have experience in the following areas: Office work Retail sales Public speaking
 Arts and crafts Photography Answering phones

When are you available to volunteer?*

Weekdays Weekends Both

***Note: While scheduled and public tours are offered throughout the week, special events, mandatory workshops, and continuing education sessions fall on the weekend. Prospective volunteers should plan to be available approximately six weekend days per year.**

Please mark the position that interests you the most. If there is more than one, please rank the position in order of preference (with #1 being the highest).

_____ **Administrative Volunteer** - Assists with greeting visitors, office-related work, and other museum programs and projects.

_____ **Collections Volunteer** - Assists with the care and maintenance of objects in the museum's collection and the site's historic buildings, along with other museum programs and projects.

_____ **Docent** - Conducts tours for visitors of all ages and assists with other museum programs and projects.

_____ **Museum Teacher** - Assists with youth-based programs, along with other museum programs and projects.

All volunteer staff members are expected to fulfill their specific job requirements, attend or make up all required training sessions, and work two or more special events per year.

_____ **Please initial to acknowledge that you understand the volunteer requirements stated above.**

I understand that this is an application for, and not a commitment or promise of, a position on the volunteer staff of the Workman and Temple Family Homestead Museum. I certify that the information provided throughout the selection process is complete and accurate to the best of my knowledge.

Signature

Date

Parent/Guardian Signature (if under 18)

Date

Please print name of Parent/Guardian (if under 18)

Please mail, fax, or deliver completed applications to:

Homestead Museum
Attn: Programs Manager
15415 E. Don Julian Rd.
City of Industry, CA 91745

Phone: (626) 968-8492
Fax: (626) 968-2048