

Teen Volunteer Application

(Volunteers must be ages 14-17 to apply for the Teen Volunteer Program)

Name: _____ Date: _____
Street Address: _____
City/Town: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
Email Address: _____

Education

Name of School

High School: _____ Current Year: _____
Other: _____ Current Year: _____

Volunteer Position

Are you available and interested in volunteering for longer than one four-month cycle? Yes No Not Sure
What days are you available? _____

Tell Us About Yourself!

Why are you interested in volunteering at the Discovery Museum?

What are some of your interests, hobbies, or skills?

Please list other commitments or extracurricular activities you are involved in:

Former/Current Volunteer or Work Experience

Job or Position	Supervisor/Organization	Dates worked
1.		
2.		
3.		

References

Name and Relationship	Phone Number	E-mail Address	How long have they known you?
1.			
2.			
3.			

(Please note: Relatives do not count as references. Teachers or adults involved in extracurricular activities are great options!)

Please read the following statement carefully before signing

I authorize the Discovery Museum to verify all statements contained in this application. I understand that any misrepresentation or omission of facts is cause for dismissal.

My signature certifies that I have read and agree with the above statements.

Signature

Date