



Junior Volunteer Application.

If you are 18 or older, please ask for an adult volunteer application.

DATE OF APPLICATION: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: () _____ CELL PHONE: () _____

E-MAIL: _____

WHAT IS THE BEST WAY TO REACH YOU? _____

HOW DID YOU LEARN ABOUT THIS OPPORTUNITY? _____

.....

Please indicate the times that you are available to volunteer.

Day	Morning	Afternoon
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

what kind of volunteer are you?

name	level of interest 1-5 (1=low, 5=high)	description
Music Volunteer		Do you play an instrument? Share your musical talents here at the museum! Lead sing-alongs, play music at summer camp and theatre productions.
Culture Volunteer		Would you like to share your culture at the museum? Lead different activities sharing your cultural experiences with visitors at the museum through cooking, dance, language, music, and anything you can think of!
Creative Volunteer		You like art, imagination, and creative play! Begin with activities like Face Painting, Make & Takes, and Play-Doh. Move on to helping with Big Messy Art and coming up with artistic projects of your own.
Theatre Volunteer		Start with programs like Story Time and Stage Stories, as well as floor walks. Move on to helping with our theatre workshops, rehearsals, and performances.
Science & Nature Volunteer		Learn and lead programs like Tide Pool Touch Tank, Star Show, and Camera Obscura. Move on to learn our other programs about animals and nature.
Play Volunteer		Start with floor walks and facilitating museum play. Eventually learn programs like Play-Doh, Face Painting and the Touch Tank.
Green Thumb Volunteer		Help us create and maintain simple gardens throughout the museum: work on window boxes, raised beds, and other plants both indoors and in the backyard.

EDUCATION

Current School: _____ Grade Level: _____

BACKGROUND INFORMATION

Please list any previous work or volunteer experience.

Have you worked with children? If so, please describe.

What are your favorite subjects, hobbies, skills or special interests? Please tell us about them.

Why are you interested in volunteering at Children’s Museum & Theatre of Maine? What kinds of volunteer work would you like to do with us?

What is one of your favorite memories from childhood?

Are you volunteering to fulfill a requirement? _____

If yes, please list the name and phone number of the service coordinator at your school.

We ask that all volunteers make a commitment of six months. Is this something you can do? How long do you see yourself volunteering with us?

REFERENCES: Please list two adults not related to you who can provide a reference. This could be a teacher, a coach, an employer, a neighbor or any adult who knows you well.

Name	Relationship	Telephone
(1)		
(2)		

VOLUNTEER STATEMENT

I certify that the information that I have provided is true and correct to the best of my knowledge. I understand that any false or misleading statements on my application may result in refusal of my volunteer service, regardless of when discovered. I authorize Children's Museum & Theatre of Maine to verify any statements made in this application and to contact my references.

I acknowledge that I offer my services as a volunteer and have no expectation of payment, monetary or otherwise, for those services. I agree to follow the rules of conduct and abide by the policies of Children's Museum & Theatre. I understand that if I do not abide by Children's Museum & Theatre policies, rules and regulations, I may be dismissed from my position as a volunteer.

Signature Date

PARENTAL CONSENT

I (We) have read through my (our) child's information for the volunteer program at Children's Museum & Theatre of Maine. I (We) understand that arrangements for transportation must be made between my child and myself except in the case of an emergency. I (We) approve of my child working as long as he/she chooses during the hours already indicated.

Signature Date

Signature Date

Please return your completed application to:
Children's Museum & Theatre of Maine
ATTN: Community Engagement Coordinator
PO Box 4041
Portland, Maine 04101
FAX: 207-828-5726

For more information please contact the Community Engagement Coordinator at 828-1234 ext. 241.

**CHILDREN'S MUSEUM & THEATRE OF MAINE DOES NOT DISCRIMINATE AND
COMPLIES WITH ALL APPLICABLE DISCRIMINATION LAWS.**