

# Volunteer Application

## Contact Information

Name	
Address	
City / Postal Code	
Phone/Cell	
E-Mail Address	
Date of Birth	

## Emergency Contact

Name	
Relationship to Volunteer	
Day Phone	
Evening/Cell Phone	

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

## Languages

Please mark with ' X '

Languages Spoken    English \_\_\_    French \_\_\_    Other \_\_\_    (Specify) \_\_\_\_\_

Languages Written    English \_\_\_    French \_\_\_    Other \_\_\_    (Specify) \_\_\_\_\_

## References

1.) Name / Phone Number	
Relationship to Volunteer	
2.) Name / Phone Number	
Relationship to Volunteer	

# Volunteer Application

## Interests

Tell us in which areas you are interested in volunteering (Please mark with ' X ')

- |  |  |
|--|--|
| <input type="checkbox"/> Education Programs      | <input type="checkbox"/> OMY (Oshawa Museum Youth) |
| <input type="checkbox"/> Special Events          | <input type="checkbox"/> Visitor Host              |
| <input type="checkbox"/> Gardening / Maintenance | <input type="checkbox"/> Archives                  |
| <input type="checkbox"/> Museum Collection       | <input type="checkbox"/> Victorian Tea Assistant   |
| <input type="checkbox"/> Work From Home          |  |

## Availability

During which hours are you available for volunteer assignments? (Please mark with ' X ')

- |   |  |
|---|--|
| <input type="checkbox"/> Weekday mornings   | <input type="checkbox"/> Weekday evenings (Evening Programs)         |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons (Sunday/Summer Saturday) |

## Signature

Name (printed)	
Signature (Volunteer or Parent/Guardian if under 17)	
Date	

## Office Use Only

Date Received: _____	Interview Date/Time: _____
Police Check received: _____	Date: _____

Please return application along with a resume and  
**recent** (within one year) police check to:

Oshawa Museum  
1450 Simcoe Street South, Lakeview Park  
Oshawa, ON L1H 8S8

Jillian Passmore – Adult Volunteer Co-ordinator – [programming@oshawamuseum.org](mailto:programming@oshawamuseum.org)  
Lisa Terech – Oshawa Museum Youth (OMY) Co-ordinator – [membership@oshawamuseum.org](mailto:membership@oshawamuseum.org)