

VOLUNTEER/INTERN APPLICATION



MONROE COUNTY HISTORY CENTER

202 E. 6th St. • Bloomington, Indiana 47408

812-332-2517 • www.monroehistory.org

E-mail: education@monroehistory.org

Contact Information

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

E-mail: _____

Employer: _____

Employer's Phone: _____

Emergency Contact: _____

Main Phone: _____

Relationship to You: _____

Birthday Month and Day: _____

Are you under 18 years of age? NO YES

Guardian signature if under 18: _____

Education

Please list schools attended and degree(s) received:

Are you currently in HS or College? Where?

Full-time: _____ Part-time: _____ # of Enrolled Hours: _____

Please write times that you are available:

Mon. _____ Tue. _____ Wed. _____ Thr. _____

Fri. _____ Sat. _____ Evenings Only: _____

____ Long-term projects (Several weeks)

____ Short-term projects (A few hours/month)

____ On-going projects (2-4 hours/week)

____ One-time/Occasional projects (Special events)

References

Please list two business, school, or volunteer references - **not relatives** - that we may contact regarding your application:

1. Name: _____

Title: _____

Phone: _____

Relationship to You: _____

2. Name: _____

Title: _____

Phone: _____

Relationship to You: _____

Criminal History

Have you even been convicted of a crime?

NO YES

If *NO* please skip the rest of this box.

If *Yes* please answer the following questions.

Charge: _____

State and County of Charge: _____

Date of Charge: _____

Sentence: _____

Do you have community service hours to fulfill?

If *Yes*, how many hours do have to fill?

What date must these hours be filled by?

Community service contact information attached?

NO YES

Which positions are you interested in?

Please check any that match your qualifications and interests. Details will be discussed in your interview.

___ **Collections:** Catalog artifacts, data entry, photography of artifacts

___ **Education:** Aid in the development and practice of educational programs for all ages

___ **Exhibits:** Assist Collections & Exhibits committee in research, development and construction of new exhibits, maintenance of current exhibits

___ **Genealogy Library:** Assist visitors with research on genealogy/local history, data entry, and special projects

___ **Greeter:** Welcome visitors, answer general questions, and assist in Museum Store when necessary

___ **Office:** Assist with mailings, filing, or data entry

___ **Research:** Conduct research for local history queries, for donated artifacts, or upcoming exhibits

___ **Technology:** Graphic design, website enhancements, or publication creation

Are there any other skills, talents or experiences that may be of value to us? _____

Please specify any limitations or requests that you may have involving volunteering at MCHS: _____

Please read the statement below:

As a volunteer or intern of the Monroe County Historical Society, Inc. I will try to do the following to the best of my abilities. If I fail to do so I understand that I can be released from my duties.

- I will maintain contact with my supervisor(s).
- I will maintain a reasonable appearance.
- I will treat all patrons, volunteers, interns, and staff with the utmost respect and dignity.
- I will arrive to the desired location (History Center or elsewhere) at the previously arranged time. If I am unable to do so I will try to contact the Historical Society to notify them of my failure to arrive.
- I understand that I can approach the Volunteer/Intern Coordinator with any problems that I may have regarding my duties or inter personal relations surrounding the Historical Society.
- I understand that I can approach the Managing Director or Board President if the Volunteer/Intern Coordinator can not solve the above mentioned problems.
- I have notified the Volunteer/Intern Coordinator of any special needs that I may have.

I certify that the statements made in this volunteer application are true and correct, and have been given voluntarily. I understand that misrepresentation is cause for dismissal. I understand that a background investigation check may be made whereby information maybe obtained through personal interviews, a police-criminals record check, and other sources that have information about me. I hereby grant permission and consent to any such verification and investigation, agree to cooperate in same, and release from all liability or responsibility all persons, organizations, companies and corporations collecting and supplying information. My services are donated to the Monroe County Historical Society without contemplation of compensation or future employment and given for charitable reasons. I understand that failure to follow MCHS policies and procedure may be cause for dismissal. I agree to uphold the MCHS mission of historical preservation, exhibitions and education through my actions and words. I also assume the risk of injury and all medical expense incurred from any injury resulting from my volunteer participation. I understand, acknowledge, and agree I am not covered by Workers' Compensation insurance or benefits provided thereunder and I do hereby release, discharge, and hold harmless the Monroe County Historical Society, Inc., its agents, representatives and employees, from any and all claims whatsoever, known or unknown, for damages or injuries to myself.

Must be signed in front of a museum representative.

Volunteer Signature

Date

Museum Rep. Signature

Date