

Santa Monica History Museum

1350 7th Street Santa Monica, CA 90401 P: (310)395-2290 F: (310) 395-2298
www.santamonicahistory.org info@santamonicahistory.org



Volunteer Application

Your information

Name (first, middle initial, last): _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Preferred method of contact: Phone _____ Email _____

Your background

Employer/school: _____

Address: _____

Title/position/student: _____

Highest level of education: _____ Major/Course of study: _____

Your availability

Tuesday From: _____ To: _____ Friday From: _____ To: _____

Wednesday From: _____ To: _____ Saturday From: _____ To: _____

Thursday From: _____ To: _____

Current museum hours are: Sunday & Monday-closed, Tuesday & Thursday-12-8, Wednesday, Friday, & Saturday-10-5

How many hours do you plan to volunteer?

_____ Hours per week _____ Hours per month _____ Special Events

How long do you plan to volunteer? _____

How did you become interested in the Santa Monica History Museum Volunteer Program?

Hobbies and/or special interests:

Please list any other experience, skills, qualifications, or professional associations that you believe could be of benefit to the Santa Monica History Museum

Languages spoken (other than English): _____

References

Please name two people not related to you who have knowledge of your work/volunteer experience within the last three years. If this does not apply, then provide school or personal references who are not related to you.

1st Reference

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Relationship: _____ Years known: _____

2nd Reference

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Relationship: _____ Years known: _____

Questionnaire

Have you ever used or been known by any other name? _____ If yes, what? _____

Have you ever been convicted of a misdemeanor or felony? _____

Have you ever been dismissed from any other volunteer program? _____

You may attach a resume, if so desired.

I agree to hold as absolutely confidential all privileged and/or sensitive information, which I may obtain directly or indirectly, concerning the "Museum", its guests, and staff (including employees and volunteers), I agree that my services are donated to the "Museum" without contemplation of compensation or future employment.

I certify that the answers given by me to the foregoing questions and statements are true, correct, and without omissions. I authorize the Santa Monica History Museum ("Museum") to investigate and/or verify the foregoing information and any other information which might assist it in determining my qualifications for volunteering. I release the "Museum" and my former employers and all others from liability from damage which may result from such investigation, if upon such investigation, anything contained in this application is found to be untrue. I further agree to comply with all policies and procedures, as well as safety practices in all areas of the "Museum" I understand that my volunteer status may be terminated at any time for failure to comply with policies and procedures of the "Museum," including those of the volunteer program; for absence without notification; for reasons of unsatisfactory attitude, work, personal appearance, and/or for any other circumstances which, in the judgment of the "Museum", would make my continued service as a volunteer contrary to their best interests.

ANY PERSON WHO GIVES FALSE INFORMATION WILL BE SUBJECT TO IMMEDIATE DISMISSAL FROM THE VOLUNTEER PROGRAM.

Signature: _____ Date: _____