



**VOLUNTEER & INTERN APPLICATION**

<p><b>Office Use Only:</b>  <i>Staff Initials on each line</i>          ___ Interview Conducted          Start Date: _____          End Date: _____</p> <p><i>Notes:</i>          _____          _____          _____          _____</p>
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Name: \_\_\_\_\_ Date of Application: \_\_\_ / \_\_\_ / \_\_\_  
Age (if minor): \_\_\_\_\_ Date of Birth (if minor): \_\_\_ / \_\_\_ / \_\_\_

**CONTACT INFORMATION**

Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

FOR VOLUNTEERS WHO ARE MINORS ONLY  
*(To be completed by the parent or guardian of a volunteer who is a minor only.)*

Name of Parent/Guardian: \_\_\_\_\_

**CONTACT INFORMATION** (If different from above)

Address \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

I, \_\_\_\_\_ hereby permit \_\_\_\_\_, to volunteer at the Worcester Center for Crafts, assisting with (please list event(s), class(es), camp(s), workshop(s), etc.)

I agree that I will not hold the Worcester Center for Crafts responsible for any injury, loss or damage to the individual or his/her possessions.

Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

**ABOUT ME**

Are you hoping to volunteer as part of a requirement for school, work, etc.? (circle one) YES NO

If so, please indicate the name of your school/work, and contact information for your supervisor:

Name of school/university/college/other: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

If not, why do you want to volunteer?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What specific skills, abilities, talents, if any, do you feel you can contribute to the Worcester Center for Crafts?

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Where have you volunteered or interned in the past?

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**AVAILABILITY**

Please indicate the hours you are available each day of the week. Be sure to make a note of any differing availability, i.e. increased availability in the summer, etc.

**Regular Availability**

**Additional notes on availability**

Monday:	_____	
Tuesday:	_____	
Wednesday:	_____	Thursday: _____
	Friday: _____	
	Saturday: _____	
	Sunday: _____	
	_____	

Please check off any of the following items that help to describe the kind of volunteering tasks you are looking to do:

- Mailings
- Events
- Studios
- Summer Camps
- General Help

Please check off the item that best describes the kind of volunteering experience you are looking for:

- Set Weekly Schedule
  - Completion of Required Volunteer Hours
- If so, how many hours need to be completed? \_\_\_\_\_ By when? \_\_\_\_\_

**PREFERRED ACTIVITIES**

Please note any activities you would prefer, and also note any tasks or activities that you are unable to do.

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