



VOLUNTEER APPLICATION

PERSONAL INFORMATION (please complete all sections)

Name: _____ Date: _____
Last First Middle

Address: _____
Street Address City State Zip

E-mail Address: _____

Home Phone: _____ Other Phone: _____

EMERGENCY CONTACT INFORMATION

Name: : _____ Relationship: _____

Home Phone: _____ Other Phone: _____

Allergies, medical conditions, or medications we should be aware of in case of emergency:



GENERAL INFORMATION

Please tell us about your volunteer interests (please check all that apply):

- Tour Program
- Museum Store
- Office Assistance (social media, data entry)
- Development (fundraising)
- Events and Programs
- K-12 Education
- Collections Management
- Historic Preservation and Facilities
- Cultural Landscapes (pollinator garden, flower beds)

Other _____

Please tell us about any special skills or certifications you have that would benefit our volunteer program (Master Gardener, foreign languages, Adobe Creative Suite, MS Office, social media, web development, legal, event coordination, etc.):



Have you worked/volunteered for The Mining & Rollo Jamison Museums in the past?
 ____ Yes ____ No

If yes, when, and who was your supervisor?

Do you have friends or relatives currently working for The Mining & Rollo Jamison Museums?..... ____ Yes ____ No

If yes please list name(s) and relationship:

How did you hear about our volunteer opportunities?

What interests you most about volunteering at The Mining & Rollo Jamison Museums?

AVAILABILITY

Please indicate hours you are available to volunteer

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Please indicate how often you are available to volunteer:

Weekly Two times per month Monthly Special events Seasonal (list months)



REFERENCES

Please list two references including at least one professional reference.

Name	Telephone Number	Email Address	Relationship	Years Known

I understand that my services are being offered on a voluntary basis without anticipation of financial remuneration. For my safety and that of others, I will comply with the Museum’s volunteer policies, safety rules and other directions for all volunteer activities. I will supervise any child or other person for whom I am responsible. If I become aware of any hazardous condition or danger at a Museum program site, I will alert the Museum. I grant permission for my photo to be used in any promotional materials produced by the City of Platteville | The Mining & Rollo Jamison Museums. I shall indemnify and hold harmless the City of Platteville, the Friends of The Mining & Rollo Jamison Museums, their Boards and officers, agents and employees from and against all claims, demands, loss or liability of any kind or nature for any possible injury incurred during volunteer service that is not caused by any intentional misconduct or gross negligence by or of the City of Platteville | The Mining & Rollo Jamison Museums.

Signature: _____ Date: _____

If under 18 years of age, you must have a legal guardian sign below:

Guardian name: _____

Signature: _____ Date: _____

(Please print)

Please return completed application to:

The Mining & Rollo Jamison Museums, 405 East Main Street, Platteville, WI 53818

Telephone: (608) 348-3301, Email: museumdirector@platteville.org