

Volunteer Application

v01.17

Personal Information

Full Name			
Mailing Address			
City	State	Zip	
Primary phone number ()			
Email address			
Are you currently a CMA member? 🗆 YES	□ NO		

Are any of your family or friends CMA employees, volunteers or other museum affiliates? Yes No

Please list

When are you able to volunteer?

How did you hear about the Columbus Museum of Art Volunteer Program? Check all that apply

□ Website □ Current Docent □ Newspaper

□ Friend □ Staff member □ Other _____

Education

List any advanced degrees, certificates, or training you have completed.

School/Organization	Describe the degree, certificate, or training	When was it completed?

Employment Experience List your most recent and/or most significant employment

Organization	How long?	Position	Brief description of role

Volunteer Experience

Organization	How long?	Position	Brief description of role

Skills and Interests

This section is to help us identify your skills and interests. Please be honest, there are no right answers.

Please read all of the following descriptions carefully and rate each item on the following scale: 1 = strongly disagree 2 = disagree 3 = neutral 4 = agree 5 = strongly agree

I have a strong interest in art history.	
I fluently speak a second language (which language).
I enjoy interacting and connecting with many different kinds of people.	
I am comfortable with public speaking.	
I am comfortable working with those who have special needs or disabilities.	
I consider myself to be a flexible person and can adapt easily to change.	
I am comfortable with giving directions to others and/or managing large groups.	
I am comfortable with conversational pauses or periods of silence.	
I enjoy problem solving.	
I enjoy working with children and students (which age groups/grades?).
I can relate to teens.	
I feel that working with a team is important.	
I enjoy trying new things.	
Other people consider me to be a good leader/have strong leadership qualities.	
I have a healthy sense of humor.	

PLEASE CAREFULLY READ THIS BEFORE SIGNING BELOW:

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. In the event I am selected as a volunteer at the Columbus Museum of Art I am willing to receive a criminal background check and will comply with all policies and practices established by the program and the Museum.

Signature of Applicant:

Date: _____

Mail application to:

Attn: Volunteer Kim Hopcraft Columbus Museum of Art 480 E. Broad St. Columbus Ohio 43215 Email application to:

Kim Hopcraft Kim.hopcraft@cmaohio.org Subject line: Volunteer application

Great Experiences with Great Art for Everyone

For internal use only Follow up? □ YES □ NO

Comments: