

# **Docent Program Application**

v07.16

Personal	Inform	atio	n						
Full Name									
Mailing Address									
City				State	_ 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 will	l you b	e ab	le to condu	ct tours at	CMA?				
Monday	Tueso		Wednesday		Friday	Weekday Evenings	Saturday	Sunday	
									]
When will you be able to attend trainings at CMA?									
Monday mornings		Thu	(4.0)	(4.0)		y mornings			
How did you hear about the Columbus Museum of Art Docent Program?  Check all that apply									
☐ Website ☐ Newspaper			□ Currer	☐ Current Docent (name)					
□ Friend			Staff member	er	□ Other				
Have you had previous docent training? ☐ YES ☐ NO									
Institution How long?									

### 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. These statements help us to develop a diverse docent class. Please be honest: there are no correct 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 = ag	ree 5 = strongly agree
I enjoy interacting	and connecting with	many different k	inds of people.	
I am comfortable	with research includi	ng internet, librar	y, and primary so	urce.
I fluently speak a	second language (wh	nich language		).
	omputer skills (i.e. wo oting basic errors and		soft Office, basic i	nternet functions, social
I have a strong in	terest in art history			
I am comfortable	with public speaking.			
I enjoy creating a	rt (media:		).	
I am comfortable	working with those w	ho have special	needs or disabilitie	<del>9</del> 8.
I consider myself	to be a flexible perso	n and can adapt	easily to change.	
I am comfortable	with giving directions	to others and/or	managing large g	groups.
I am comfortable	with conversational p	auses or periods	of silence.	
I enjoy problem s	olving.			
I enjoy working w	ith children and stude	ents (which age g	roups/grades?	).
I can relate to tee	ns.			
I feel that working	with a team is impor	tant.		
I enjoy trying new	things.			
Other people con	sider me to be a good	d leader/have str	ong leadership qu	alities.
I have a healthy s	sense of humor.			
Technology / Commu	nication			
How often do you check y		a weekC	nce a day	Many times a day
How do you check email/	go online? (Check al	I that apply)	Laptop/desktop	Tablet Phone

#### **Personal Statement**

Tell us why you are interested in becoming a Docent at the Columbus Museum of Art. Why would you make a great new addition to the CMA Docents?

(Please attach your answer on an additional page. Please do not exceed one page.)

#### PLEASE CAREFULLY READ THIS BEFORE SIGNING BELOW:

Applications are due: Friday, July 28, 2016

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 docent candidate 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.

By submitting this application I am willing to commit to the expectations as outlined in the "2016-2017 CMA Docent Information Sheet".

The Columbus Museum of Art can only accept a limited number of docent candidates. Select applicants will be contacted for an in-person interview. If you are not selected for an interview, a letter will be sent to the mailing address listed on this application.

Signature of Applicant:

Date:

Mail application to:

Email application to:

Attn: Docent Class 2017

Megan Moriarty
Megan Mo