

Date: _____

The Intrepid Sea, Air & Space Museum requests the following information because of our dedication and commitment to the Museum. Please complete all sections and if possible, include a resume. An incomplete application will delay our response. Questions on this application are asked for the sole purpose of considering you for volunteer services. When complete please e-mail or mail to:

Volunteer Department Intrepid Museum
1 Intrepid Square 12th Ave & 46th St
New York, NY 10036

E-mail: volunteers@intrepidmuseum.org

PERSONAL INFORMATION:

First Name: _____ Last Name: _____

Address: _____
City State Zip Code

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact: _____ Emergency # _____ Relation: _____

Tell us briefly about yourself: _____

Special Skills or Training: _____

Proficiently Spoken Languages: _____

Why do you want to volunteer at the Intrepid Museum? _____

How did you hear about Intrepid's volunteer opportunities? _____

VOLUNTEER EXPERIENCE: *(current and/or previous)*

Agency/Organization Name: (name and location) _____

Position: _____

Duties: _____

Other Community/Volunteer Activities: _____

EMPLOYMENT: (If resume is available, please submit with application)

Starting with your most recent employer, provide the following information:

Employer: _____

Month	Year		Month	Year
Dates Employed:		/	to	/

Street Address: _____

Position held: _____

Employer: _____

Month	Year		Month	Year
Dates Employed:		/	to	/

Street Address: _____

Position held: _____

EDUCATION:

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	

AVAILABILITY: (Indicate the day and times that you are able to volunteer) **Date you can Start:** _____

Mon _____	Tues _____	Wed _____	Thurs _____	Fri _____	Sat _____	Sun _____
10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>	10AM - 2PM <input type="checkbox"/>
1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>	1PM - 5PM <input type="checkbox"/>

Listed below are many of the types of volunteer opportunities at the the Intrepid Museum. Please mark the areas that most match your skills and talents. Remember that **any** volunteer assignment is important to the success of the museum.

- | | | |
|--|--|----------------------------------|
| <input type="checkbox"/> Administrative Services | <input type="checkbox"/> Exhibit Explainer | <input type="checkbox"/> Greeter |
| <input type="checkbox"/> Aircraft Restoration | <input type="checkbox"/> Education | |

Other: _____

We require a 4 hour commitment on any given day that you volunteer and a minimum of 8 hours per month to be an active part of the Intrepid Volunteer Program. I certify that all information in this application is true and complete. I understand the requested information is for the sole purpose of gathering accurate information for volunteer services at the Intrepid Sea, Air & Space Museum. I have read and understand the above and by my signature consent to these statements.

Signature: _____ Date: _____

Please call 646-381-5058 for more details. We would like to have you aboard!