

Volunteer Application



Personal Information

Name _____ Phone/Cell _____

Address _____ City/Town _____

Postal Code _____ Email _____

Date of birth _____

Emergency Contact

Name _____ Relationship to Volunteer _____

Daytime phone # _____ Evening/Cell phone # _____

Please list any related experience (*professional, volunteerism, affiliations, and licenses/certificates*): _____

Languages spoken: English _____ French _____ Other _____

Languages written: English _____ French _____ Other _____

References

1. Name _____ Phone/Email _____ Relationship _____

2. Name _____ Phone/Email _____ Relationship _____

Areas of Interest

- | | |
|--|---|
| <input type="checkbox"/> Education Programs | <input type="checkbox"/> Tour Guide/Gift Shop Attendant |
| <input type="checkbox"/> Special Events/Children's Programs | <input type="checkbox"/> Archives |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Victorian Tea Assistant |
| <input type="checkbox"/> Museum Collection | <input type="checkbox"/> Work from Home |
| <input type="checkbox"/> Oshawa Youth Program | <input type="checkbox"/> Maintenance Assistant |
| <input type="checkbox"/> OHS 60 th Anniversary Planning Committee | |

Availability: (circle) Mon. Tues. Wed. Thurs. Fri. Sun.

Weekdays: Mornings _____ Afternoons _____

How did you hear about us?

- | | |
|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Guidance Councillor |
| <input type="checkbox"/> Youth Program | <input type="checkbox"/> Website |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Television |
| <input type="checkbox"/> Friend/Volunteer | <input type="checkbox"/> Information Durham |
| <input type="checkbox"/> Newspaper | |

Signature of Volunteer

Date

Signature of Parent/Guardian (*If under 17*)

OFFICE USE ONLY

Date Received: _____ Interview Date/Time: _____

Reference Check completed: _____ Date: _____

Police Check received: _____

Please return application along with a resume and
recent (within one year) police check to:
Oshawa Community Museum
1450 Simcoe Street South, Lakeview Park
Oshawa, ON L1H 8S8

membership@oshawamuseum.org