



# VOLUNTEER APPLICATION

## APPLICANT INFORMATION

Name:			
Address:			
Phone:			
E-mail:			
How did you hear about this opportunity?			

## EDUCATION

School Name (1):		Location:	
Area of Study:		Did you graduate?	Yes No
School Name (2):		Location:	
Area of Study:		Did you graduate?	Yes No
Additional Information:			

## WORK EXPERIENCE

Company:		Duties:	
Address:			
City, State ZIP Code:			
Phone:		How long did you work there?	
Company:		Duties:	
Address:			
City, State ZIP Code:			
Phone:		How long did you work there?	
Company:		Duties:	
Address:			
City, State ZIP Code:			
Phone:		How long did you work there?	

## WEEKDAY AVAILABILITY

Monday	Tuesday	Wednesday	Thursday	Friday

Note: Volunteers must be scheduled when staff is present. Unless otherwise arranged or discussed, weekend/evening shifts are unavailable.

## INTEREST

Areas of Interest:	Gallery Docent Research Programming Administrative Collections (experience preferred) Exhibits (experience preferred)	Other (specify):	
Additional Notes/Comments:			

## AGREEMENT

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to a volunteer opportunity, I understand that false or misleading information in my application or interview may result in my release. I understand that this is an unpaid opportunity.*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_



Please submit completed applications via e-mail to [samantham.tubbs@state.nm.us](mailto:samantham.tubbs@state.nm.us) or in person at 1050 Old Pecos Trail, Santa Fe, NM 87505.