



# Montclair Art Museum

## VOLUNTEER APPLICATION

The Montclair Art Museum is dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, national origin, the presence of any mental, physical, or sensory disability, sexual orientation, or any other basis prohibited by federal or state law.

**Please complete entire application**

### PERSONAL INFORMATION *(Please print)*

<b>Name</b>	Last	First	<b>Today's Date (M/D/Y)</b>	
<b>Address</b>	Street	City	State	Zip Code
<b>Phone Number</b>	Daytime	Evening	Cell	
<b>Emergency Contact Name</b>	Relationship		Phone	
<b>Email Address</b>	Referred by			

### INTERESTS/SKILLS *(please mark as many as apply)*

<input type="checkbox"/> Prefer seated position	<input type="checkbox"/> Spring Gala	<input type="checkbox"/> Flyer Distribution
<input type="checkbox"/> Clerical/Mailings	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Grounds/Gardening
<input type="checkbox"/> Working in Museum Store	<input type="checkbox"/> Computer skills – specify _____	<input type="checkbox"/> Enjoy working with children
<input type="checkbox"/> Special skills or interests _____		

**Do you prefer to work on one-time activities or on a more regular basis? (please specify)** \_\_\_\_\_

Specify hours available for each day of the week	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Are you currently a member of the Montclair Art Museum? \_\_\_\_\_ **(Membership is required within 3 months of becoming a volunteer.)**

### REFERENCES *(Please list two references other than family)*

Name, phone number And relationship	
Name, phone number And relationship	

Volunteers will be contacted to schedule an interview.  
Thank you for your interest in the Montclair Art Museum Volunteer Program.

Please mail or fax completed form to: Montclair Art Museum, Volunteer Programs, 3 South Mountain Avenue, Montclair, NJ 07042  
Phone: 973.259.5124; Fax: 973.746.9118