



## Volunteer Application

### Personal Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell/ Pager: \_\_\_\_\_ E-mail: \_\_\_\_\_  
**(Winter Residents Only)** Months in Arizona: \_\_\_\_\_ to: \_\_\_\_\_  
Summer Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

*Please indicate what areas of the Volunteer program you are interested in:*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Administrative Support      | <input type="checkbox"/> Festivals/Special Events | <input type="checkbox"/> Instructor's Aide |
| <input type="checkbox"/> Museum Admissions Attendant | <input type="checkbox"/> Museum Docent (MCA)      |  |
| <input type="checkbox"/> Store Assistant             | <input type="checkbox"/> Tour Guide Ambassador    |  |
| <input type="checkbox"/> Usher                       | <input type="checkbox"/> Education Outreach       |  |

### Volunteer and Professional Experience

Do you currently volunteer for other departments within the City of Mesa?  Yes  No

If yes, please indicate which Department(s):

- Arizona Museum of Natural History     Arizona Museum for Youth     Parks and Recreation  
 Police/Fire     Library     Neighborhood Services     Other

Are you presently employed?     Full-Time     Part-Time     Not Employed     Retired

Describe your work/professional experience: \_\_\_\_\_

Do you have any college degrees/ certifications/ special skills? \_\_\_\_\_

Are you currently a student?     Yes     No    If yes:     Full-Time     Part-Time

Do you speak any other languages? \_\_\_\_\_  Fluent     Semi-Fluent     Minimally Fluent

Do you have experience working with  youth or  the developmentally disabled?

If so, where, how and to what extent? \_\_\_\_\_

Are you able to stand or walk for long periods of time?     Yes     No

Do you have previous volunteer experience in the arts?     Yes     No

If so, where and for how long? \_\_\_\_\_

Volunteer Experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any hobbies or special interests? \_\_\_\_\_  
\_\_\_\_\_

Favorite Play: \_\_\_\_\_ Favorite Movie: \_\_\_\_\_

Favorite Place to Travel: \_\_\_\_\_ Favorite Theater: \_\_\_\_\_

Favorite Artist or Art Style: \_\_\_\_\_ Favorite Museum or Gallery: \_\_\_\_\_

What are your reasons for volunteering? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Information**

References: *List two references that may be contacted. References cannot be related to you and must have known you for at least one year.*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Have you ever been arrested or convicted of any crime?  Yes  No

*The City of Mesa highly values integrity; it is essential that you be honest and truthful when answering this question. The information disclosed will not necessarily bar you from further consideration.*

Date: \_\_\_\_\_ Crime: \_\_\_\_\_ Location: \_\_\_\_\_

**Certification of Applicant**

I hereby apply for work as a volunteer with the Mesa Arts Center. I certify that all answers to the questions on this application are true, and I understand and agree that any misstatement or omission of material facts contained in this application may disqualify me for a volunteer opportunity. I hereby authorize the City of Mesa to verify the accuracy of the statements on this application, and for assignments considered safety or security sensitive, authorize the City to conduct fingerprinting for background checks through the Department of Public Safety and the Federal Bureau of Investigation. I understand that while volunteering, I will be covered by the City of Mesa Workers' Compensation policy under ARS statute 23-901.06. I understand that I will be expected to follow established policies and procedures and a mutually acceptable work schedule. I will promptly notify my supervisor if I am unable to work as scheduled.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

## Mesa Arts Center Volunteer Emergency Contact Form

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please provide the name and phone number(s) of someone not living with you in case of an emergency:*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number 1: \_\_\_\_\_ Phone Number 2: \_\_\_\_\_

Allergies, medical conditions, or medications we should be aware of in case of an emergency: \_\_\_\_\_

How did you hear about the Volunteer Program?

- Friend or Family member     Advertisement/Brochure     at Mesa Arts Center     MAC Website  
 Volunteer Center     VolunteerMatch.Org     College or University     City of Mesa  
 Active MAC Volunteer (*Please provide name of volunteer*) \_\_\_\_\_  
 Other (*Please Explain*) \_\_\_\_\_

Please return completed application to:

Volunteer Coordinator  
Mesa Arts Center- MS #7710  
P.O Box 1466  
Mesa, AZ 85211-1466  
Fax: (480) 644-6503

## **Mesa Arts Center Volunteer Work Agreement Waiver**

I understand that as a volunteer I will be considered a member of the team at the Mesa Arts Center and will be expected to assume the responsibilities in my job description.

I understand and agree to:

- Dress appropriately for my assigned duties, including wearing my ID badge and presenting a clean and neat appearance.
- Be reliable and punctual. I will notify my supervisor prior to my start time, if delayed or unable to keep my schedule.
- I understand that I must not perform major tasks outside of my written job description. I will work with the Volunteer Coordinator or site supervisor to add new duties to my position as I learn more about my assignment.
- Be a team player. I will make suggestions and ask the staff when I have questions.
- Comply with the Customer Service Standards set by the Mesa Arts Center.
- Act as a responsible representative of the City of Mesa.
- At no time will I be under the influence or in possession of drug and alcohol unless;
  - such use or possession is pursuant to orders from a duly licensed physician as part of a lawful course of treatment , or unless
  - in the case of vapor releasing substance containing a toxic substance, such use or possession is consistent with manufacturer's instructions and is authorized but the City for the performance of certain job-related functions.
- Report any felony or misdemeanor conviction or felony arrest to chain of command upon the start of the next scheduled work day following the conviction or arrest.
- I will abide by all the policies and procedures set by the City of Mesa, and I understand that I can be terminated at any time for not complying with the set guidelines.
- I understand that some volunteer positions require a background check.
- I understand that the City of Mesa may use my photo on any website, brochure, or other promotional materials.
- Immediate termination of volunteer duties will ensue if a weapon is brought on the premises.
- Return my ID badge to the Volunteer Office upon resignation from the Program.

In return, the Mesa Arts Center agrees to:

- Provide necessary training and orientation.
- Provide adequate working conditions.
- Review volunteer performance, provide appropriate feedback, record volunteer hours, and provide letters of recommendation on request.
- Evaluate the volunteer program, solicit suggestions from volunteers as a means to correct any problems and reassign volunteers when requested and as needed.

Volunteer Name (Print) \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_