

Volunteer Survey Form

Yes, I would like to be an Orange County Historical Museum Volunteer!
(You must be at least 14 years old and submit the following information)

Name

Date

Address

City/State/Zip

Email

Phone

Birth date

Education (School/Degree where applicable)

Previous Volunteer Experience

How did you become interested in volunteering at OCHM?

Fill out if under 18: _____

Age

Grade

School

Parent/Guardian's Name

Telephone

I am interested in:

___ Visitor Services

___ Education

___ Research

___ Collection (Objects)

___ Archives (Documents)

___ Facilities/Grounds

___ Events/Fundraising

___ Exhibits

___ Grant Writing

Days Available:

___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___ Sunday

HOURS AVAILABLE (Please Specify) _____

Have you ever been convicted of a felony? _____

If so, what was the crime(s)? _____

Please list 2 references (Non-relatives)

Name: _____

Address: _____

Phone: _____

Relationship to you: _____

Years known: _____

Name: _____

Address: _____

Phone: _____

Relationship to you: _____

Years known: _____

Do you have any serious medical problems of which we need to be aware?

Emergency Contact: _____

Name

Phone

The above statements are true and complete to the best of my knowledge.

Date: _____ Applicant's Signature: _____

Parent/Guardian's Signature if under 18: _____

For Museum Use Only

_____ Reference 1 Verified

Staff/Board Signature: _____

_____ Reference 2 Verified

Date: _____

The Orange County Historical Museum is operated by the Historical Foundation of Hillsborough and Orange County.