



Gulfcoast Wonder & Imagination Zone

Adult Volunteer Application

Personal Information							
Last Name:		First Name:		Date of Birth:		Application Date:	
Address:			City:		State:		Zip:
Phone Number: <input type="checkbox"/> Home		<input type="checkbox"/> Work		<input type="checkbox"/> Cell		Are you a past G.WIZ volunteer: [<input type="checkbox"/> Y] [<input type="checkbox"/> N]	
Email:		Emergency Contact Name:		Relationship:		Phone:	
Family Team Volunteer? (check here) <input type="checkbox"/>		Please list names of family volunteer team members and ages of minors:					
		Name: _____ Age: _____		Name: _____ Age: _____			
		Name: _____ Age: _____		Name: _____ Age: _____			
Have you ever been convicted of a felony? [<input type="checkbox"/> Yes] [<input type="checkbox"/> No] If yes, please explain:							
Note: A conviction will not necessarily bar participation in G.WIZ volunteer program, but will be considered within the context of the entire application.							
Please list all relevant training, education, work experience, and/or volunteer experience.							
Is there a specific area or project that you feel would be a good match with your skills?							
References							
<i>List names and telephone numbers of two educational/business/personal references that are not related to you.</i>							
Name: _____		Yrs known: _____		Name: _____		Yrs known: _____	
Volunteer Opportunities							
<input type="checkbox"/> Education/Programs <input type="checkbox"/> Exhibits <input type="checkbox"/> Visitor Services/Greeter <input type="checkbox"/> Landscaping/ Plant Care <input type="checkbox"/> Office Assistant / Mailings							
Please indicate the times and days of the week that you are available to volunteer.							
	Mon	Tue	Wed	Thu	Fri	Sat	Sunday
Time							
Adult Volunteer Applicant Statement							
<p>I understand that I am applying to be an unpaid volunteer for G.WIZ – The Science Museum, and that this is not an application of employment. I understand that nothing in this application is intended to imply or create an employment relationship or a contract for employment.</p> <p>As part of normal procedure for processing applications, G.WIZ – The Science Museum conducts background checks on potential adult volunteers. In order to continue the application process, a signed authorization and consent for release of personal information form is required to be included with application.</p> <p>I understand that if any misrepresentation has been made by me, I may be disqualified for consideration or dismissed if discovered at a later date.</p>							
<p>• The Volunteer Coordinator will contact you for a personal interview and tour</p>							
Volunteer Signature		Gulfcoast Wonder & Imagination Zone • 1001 Boulevard of the Arts • Sarasota, Florida 34236 Phone 941.309.4949 x123 • Fax 941.906.7292 • volunteers@gwiz.org					
For Office Use Only:							
Interview Date:			Orientation Date:			Start Date:	
Placement:			Name Tag:			Created: 3-22-11	