

VOLUNTEER INFORMATION FORM

First name	Last name
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Mr Mrs Ms Miss Other

Home Address

Street Address		
Suburb	State	Post Code
Phone Home	Work	Mobile
Fax.	Email	

I prefer to be contacted at: home work mobile email any

Emergency contact

Name	Contact Number
Relationship	

Why do you want to volunteer at the National Museum of Australia?

What are your interests, skills and hobbies?

What relevant work experience, volunteer experience, training etc do you have?

Do you have any medical conditions we should know about? Please provide details. Yes No
If yes, please provide details.

Personal Information

This information is confidentially kept by the Volunteers Unit at the National Museum of Australia, and is used for administrative and statistical purposes only.

Date of birth dd/mm/yyyy	Employment Status:
Relevant Education/Training	Other documents you have attached (please tick) <input type="checkbox"/> Letter <input type="checkbox"/> Resume <input type="checkbox"/> Othe

Your Program preferences and availability

<p><i>Please indicate your preferred Areas for Volunteering numbering 1 - 8 (1,2,3...8):</i></p> <p>Front of House: Schools Programs Public Programs Paddle Steamer <i>Enterprise</i> Temporary Exhibitions</p> <p>Behind the Scenes: Library Conservation: Curatorial Registration Other (please indicate what you would like to be involved in)</p>	<p><i>Please indicate the days and times you are available:</i></p> <p><input type="checkbox"/> Monday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Tuesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Wednesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Thursday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Friday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Saturday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p> <p><input type="checkbox"/> Sunday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon</p>	<p>How often are you available:</p> <p><input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Other</p> <hr/> <p>During School Holidays:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <hr/> <p>During Public Holidays:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <hr/> <p>Are you available on short notice (2-3hrs):</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <hr/> <p>Are you available in the evenings (after 5:00pm)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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Thank you for completing this form. Please forward this form and any other information you think is relevant to: Volunteers Unit, National Museum of Australia, GPO Box 1901, Canberra ACT 2601.

If you have any questions, please contact a Volunteers Unit staff member:

Keryn de Majnik,
 Volunteer Coordinator (02) 6208 5118

Scott Grimley
 Volunteer Roster Coordinator (02) 6208 5204

Or email volunteering@nma.gov.au

We look forward to receiving your application.

OFFICE USE ONLY:

Form completed correctly
 Date attended interview
 Date application received
 Date details entered on Volunteer Works
 Date application approved

Met by
 Received by
 Entered by
 Application approved by