



Vernon Historical Society

STUDENT VOLUNTEER APPLICATION

NAME: _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL: _____

BACKGROUND

SCHOOL: _____ GRADE: _____

Please identify your reason for volunteering:

Interest in helping in history:	_____	Scout project or badge:	_____
School class assignment:	_____	School suspension/detention:	_____
School club assignment:	_____	Youth Advisory Board req.:	_____
Religious education req.:	_____	Court-ordered restitution:	_____

If you are volunteering as a requirement for one of the programs listed above, please tell us about your assignment. (Attach any information/forms that explain your program, requirements, and need to be filled out.)

How many hours must you volunteer? _____

Is there a deadline? _____

Will you need a report completed by someone at the Society? _____

Do you also need a letter from the Society saying you will be volunteering here? _____

Are there any requirements for what tasks you should be doing? _____

Hours available to work at the Society: _____

Are you interested in a one time/occasional work or more? _____

Thank you for your interest in volunteering! We will contact you with a schedule of times that we need volunteers.

IMPORTANT: EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____

Address: _____

Phone Number(s): _____

Text? Yes No

Agreement and Signature

By submitting this application I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Signature _____ **Date** _____