



_____	Background Check
_____	References
_____	Child Abuse Clearance
_____	Orientation
_____	Shirt _____
FOR OFFICE USE ONLY	

VOLUNTEER APPLICATION

Volunteer must be at least 16 years of age. Volunteers who are not yet 18 years of age require the signature of a parent or legal guardian.

PERSONAL INFORMATION: (Please Print)

Name: _____
 Name of Parent/Legal Guardian (if under 18 years of age): _____
 Home Address: _____
 City: _____ State: _____ Postal Code: _____
 Home Phone: _____ Email: _____
 Mobile Phone: _____ (Please circle which number that we can best reach you)
 Date of Birth: _____ (month and day)

Emergency Contact:

Name: _____ Relationship: _____
 Home Phone: _____ Mobile: _____ Work: _____

VOLUNTEER POSITIONS: Choose from the positions indicated below (please indicate preference)

Harsco Science Center Administrative
 Information Desk Host Select Medical Digital Cinema Usher
 Sunoco Performance Theater No Preference

REFERRED BY: _____

SKILLS and INTERESTS:

Education

School	Name of School or Course of Study	Highest Level Completed	Currently Attending
High School			
Post-Secondary			
Other			

Special Training or Skills Received: _____

Are you receiving academic credit for your volunteer work? No Yes, Hours Required _____

Employment History (minimum past 10 years)

Employer	Job Title	From	To	Reason for Leaving

Current Employment Status: Full-Time Part-Time Student Retired Unemployed

Volunteer Experience

Organization	Role	From	To	Reason for Leaving

Please Indicate Your Availability (ex: 9 am – 1 pm, 1 pm – 5 pm, 6 pm – 10 pm)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

How long of a commitment are you prepared to make? _____

How often would you like to volunteer?

- 1 shift biweekly 1 shift/week 2-3 shifts/week special events

Please indicate the skills and experience you would bring to your volunteer role:

- Organizational Skills Experience with children Teaching skills
 Public Speaking Microsoft Office Research
 Guest Relations Board Experience Website/Graphic
 Administrative Skills
 Other: _____
 Languages spoken: _____

What are your reasons for volunteering?

- For academic credit To learn new skills For social interaction
 To gain employment skills To share my skills To stay active
 To support Whitaker Center Other: _____

Please list three references, past or present employers, teachers, volunteer supervisors, etc.

We CANNOT accept family members or friends as references.

Name	Relationship	Phone Number	Email Address

I hereby authorize the Whitaker Center to contact the above named references to establish my suitability as a volunteer and I hereby release them and their company from all liability for any damage for issuing the same. I further authorize the volunteer department to maintain this information in their records and absolve them from liability. Disclaimer: It is the policy of the Whitaker Center to screen all prospective volunteers. While we try to place every applicant, we reserve the right to select applicants according to our needs and criteria.

I understand and respect the confidential nature of the information I might have access to in performing my volunteer duties for the Whitaker Center.

Signature of Applicant _____

Date _____

Sharing Personal Information

Please note that your contact information will be added to the volunteer directory in addition, I authorize the Whitaker Center to share my contact information with:

- Human Resources Office Yes No
Development Office Yes No
Membership Office Yes No

- **Have you ever been convicted of a crime, civilian or military? Do not list minor traffic violations. A conviction record will not necessarily be a bar to volunteering.** _____
- **How did you hear about the volunteer program at Whitaker Center?** _____
- **Are you now or have you ever been related to a current or former Whitaker Center employee or volunteer?** _____

I understand that in being a volunteer for Whitaker Center, I am subject to background checks according to policy and procedure. Final acceptance as a volunteer is contingent upon these background checks. It is our policy to provide equal opportunities without regard to race, color, national origin, gender, sexual preference, age, or disability.

Signature of Applicant

Signature of Parent/Legal Guardian (If under 18)

Return to:
Volunteer Coordinator
Whitaker Center for Science and the Arts
222 Market Street
Harrisburg, PA 17101
ptaylor@whitakercenter.org
Phone: 717-724-3850