

Discovery World

at Pier Wisconsin

Volunteer Application

Applicant Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Cell Phone	
E-Mail Address	

Are you over 18 years of age? Yes No

If you answered no, please enter your date of birth. ___/___/___

(Applicants under 18 years of age must have a parent or guardian's signed consent indicated at the bottom this form)

Have you ever been convicted of a crime, pleaded no contest for any offense or violation, or have pending criminal charges against you other than minor traffic violations?

Yes No

If yes, please explain:

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Education

High School Attended		Did you graduate <input type="checkbox"/> Yes <input type="checkbox"/> No
College		Degree Earned:
Post Graduate		Degree Earned:
Other		

Employment Experience

Dates	Employer	Description of Duties

Special Skills or Qualifications

Please summarize any special skills or qualifications you have acquired through employment, previous volunteer work, education, or recreational activities.

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Person to Notify in Case of an Emergency

(If you are under the age of 18, this person must be a parent or guardian)

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Cell Phone	

Availability

Please check those times you are available for volunteer assignments.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9am-12pm	___	___	___	___	___	___	___
1pm-4pm	___	___	___	___	___	___	___
6pm-9pm	___	___	___	___	___	___	___

Interests

Tell us in which areas you are interested in volunteering.

(Positions in each area are based upon availability and may not be available at all times.)

- Desk Set (Office/Clerical/Phones)
- Special Events
- Education
- Greeters/Information Desk
- Aquarium
- Exhibits/Interpretation
- Design and Production
- Theater
- Gift Shop
- S/V Denis Sullivan

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.

Name (printed)	
Signature	
Date	

Parent/Guardian Consent (18 and under)

By signing below, I authorize the applicant listed above to participate in Discovery World's volunteer services program.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, creed, gender, religion, marital status, age, national origin or ancestry, physical or mental disability, medical condition, sexual orientation, or any other consideration made unlawful by federal, state, or local laws.

Application to the volunteer services department does not automatically guarantee placement with the organization.

Thank you for completing this application form and for your interest in volunteering with us.

Volunteer Services Staff Only

Accepted: ____ Yes ____ No Date: _____

Placement: _____ Supervisor: _____

Orientation/Training Dates:

General Orientation: _____ Job Orientation: _____

Other Training: _____

Recognitions: _____

Discovery World at Pier Wisconsin

500 North Harbor Drive
Milwaukee, WI 53202
(414) 765-9966
www.discoveryworld.org

