

PLEASE COMPLETE THE VOLUNTEER APPLICATION AND RETURN TO:

Ukrainian History & Education Center
Attn: Volunteer Coordinator
135 Davidson Avenue
Somerset, NJ 08873
Tel: (732) 356-0132
Email: volunteer@ukrhec.org

PERSONAL INFORMATION

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

EMERGENCY CONTACT INFORMATION

Full Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

YOUR BACKGROUND

Student Employed Full-time Employed Part-time Not Employed at this time Retired

Highest Level of Education, field of study: _____

Employer: _____

Department: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

UKRAINIAN HISTORY & EDUCATION CENTER OF NEW JERSEY

AVAILABILITY TO VOLUNTEER

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

Comments on Availability: _____

How Many Hours Do You Plan to Volunteer?

_____Hours per week _____Hours per month Special events only

HOW DID YOU HEAR ABOUT VOLUNTEERING AT THE UKRAINIAN HISTORY & EDUCATION CENTER?

<input type="checkbox"/> Family	<input type="checkbox"/> Museum Newsletter	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Volunteer Agency
<input type="checkbox"/> Friend	<input type="checkbox"/> Museum Staff	<input type="checkbox"/> Workplace	<input type="checkbox"/> Other
<input type="checkbox"/> Museum Visit	<input type="checkbox"/> Museum Volunteer	<input type="checkbox"/> School	
<input type="checkbox"/> Museum Member	<input type="checkbox"/> Museum Website	<input type="checkbox"/> Social Media	

Are you related to a UKrHEC volunteer or staff member? _____

Are you an UkrHEC member? Yes No

VOLUNTEER POSITIONS OF INTEREST

(Please select your top three volunteer jobs)

- | | |
|---|--|
| <input type="checkbox"/> Admission Desk | <input type="checkbox"/> Administrative & Social Media |
| <input type="checkbox"/> Docent/Tour Guide | <input type="checkbox"/> Collections Management |
| <input type="checkbox"/> Special Events Volunteer | <input type="checkbox"/> Gallery Security |
| <input type="checkbox"/> Genealogy Workshop | <input type="checkbox"/> Archives |
| <input type="checkbox"/> Education & Workshops | <input type="checkbox"/> Gift Shop |

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LANGUAGES:

	Reading	Writing	Indicate Fluency
English	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ukrainian	<input type="checkbox"/>	<input type="checkbox"/>	_____
Russian	<input type="checkbox"/>	<input type="checkbox"/>	_____
German	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

SPECIAL SKILLS:

- Data entry
- Word processing
- Photography
- Graphics/Design
- Writing
- Editing/proofreading
- Carpentry
- Audio/Visual
- Other: _____

QUESTIONNAIRE

Have you ever been convicted of a misdemeanor or felony? Yes No

Have you ever been dismissed from any other volunteer program? Yes No

Have you ever been an employee or volunteer of the UOC of USA or UkrHEC? Yes No

How did you become interested in the UkrHEC Volunteer Program?

Why do you want to volunteer at the UkrHEC?

UKRAINIAN HISTORY & EDUCATION CENTER OF NEW JERSEY

Please write a brief educational and professional biography, including your academic and employment history. If you submit a resume, you can skip this question.

Do you have any previous or current experience that is relevant to your anticipated volunteer activities?

I hereby grant to the Ukrainian History & Education Center of New Jersey the rights to use my image, interview and/or performance for Museum exhibits, associated educational programs, and/or public relations and marketing.

I understand that in the course of volunteering I may participate in or create intellectual property on behalf of the Center. I understand that all such property, and all rights to its use, belongs exclusively to the Center. I agree that my services are donated to the Center without contemplation of compensation or future employment.

I agree to hold as absolutely confidential all privileged and/or sensitive information, which I may obtain directly or indirectly, concerning the Center, its guests, and staff (including employees and volunteers).

I certify that the answers given by me on this application are true, correct, and without omissions. I further agree to comply with all policies and procedures, as well as safety practices in all areas of the Center I understand that my volunteer status may be terminated at any time for failure to comply with policies and procedures of the Center, including those of the volunteer program; for absence without notification; for reasons of unsatisfactory attitude, work, personal appearance, and/or for any other circumstances which, in the judgment of the Center, would make my continued service as a volunteer contrary to their best interests.

Signature of Applicant

Date