



KALAMAZOO INSTITUTE OF ARTS

Application for Volunteers

Name _____

Home Address _____

E-mail Address _____

Phone (home) _____ (business) _____

Phone (mobile) _____

Employer _____

Educational Experience _____

Volunteer or Related Work Experience _____

Special Skills/Interests/Hobbies in Visual Arts _____

Please Attach Copy of Resume (optional)

Availability (Please state morning, afternoon or evening under circled days):

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
_____	_____	_____	_____	_____	_____	_____

How often (weekly, monthly, etc.) _____

In the event of an emergency, please notify:

-

Name _____

Relationship _____

Phone _____

(over)

Reason for volunteering _____

Are you a KIA member? ___yes ___no ___Please send membership information.

Please check the volunteer opportunities listed below that interest you:

___Mailing

___Staff Aide (clerical)

___Gallery Shop

___Hospitality

___Membership

___Museum Education

___Exhibition Support

Special Events:

___Docent (orientation course required)

___Art Fair

___Teacher Aide

___Art & Antique Auction

___Library

___Spring Fundraiser

___Corporate Art Deliverer

Please list references:

Name address phone

Name address phone

Do you have any limitations we should be aware of? If so, please describe them. _____

Signature

Date