



# VOLUNTEER APPLICATION

Member & Guest Services  
719.295.7200 ext. 7201

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Today's Date \_\_\_\_\_ Date of Birth \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Are you a current/former employee? Yes  No

If yes, indicate date of employment \_\_\_\_/\_\_\_\_/\_\_\_\_ until \_\_\_\_/\_\_\_\_/\_\_\_\_

Department you worked in \_\_\_\_\_

If you worked under another name, indicate name used \_\_\_\_\_

Have you ever been convicted of a crime\*? Yes  No

If yes, list where, when and the nature of the offense: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Answering yes to this question will not automatically result in your being denied volunteering opportunities.

Are there any felony charges currently pending against you? Yes  No

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special skills or interests \_\_\_\_\_  
\_\_\_\_\_

Previous volunteer experience \_\_\_\_\_  
\_\_\_\_\_

Where or how did you hear of our volunteer opportunities? \_\_\_\_\_  
\_\_\_\_\_

**Areas of Interest**

Visitor Contact Areas  Children's Activities  Guiding Tours  Events

Behind the Scenes  Customer Service  Theater

**Availability**

*Please check each box that applies.*

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday   
Evenings  Holidays

*We appreciate your interest in seeking a volunteer opportunity with us.*

\_\_\_\_\_  
Signature of Volunteer Applicant Date

\_\_\_\_\_  
Signature of Parent/Guardian (If volunteer is under 18) Date

**Once the interview process is completed and you are selected to be a volunteer, we will need additional information in order to do a background check.**

**Human Resources, Volunteer Services Information Only**

Interview Date \_\_\_\_\_ Interviewed by \_\_\_\_\_

First Day of Volunteering \_\_\_\_\_

Background Check Completed Yes  No  Date \_\_\_\_\_

