



**Education Program Volunteer Application Form**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ cell / work \_\_\_\_\_

Email \_\_\_\_\_ Age (if under 21) \_\_\_\_\_

Current Employer (if applicable): \_\_\_\_\_

Phone \_\_\_\_\_

**Availability** *(please note your available hours)*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

**Special skills, training:**

**What are your hobbies – what do you do for fun?**

**What are you interested in doing at ALLI?**

- Welcome desk
- Helping at Education Program public events
- Docent opportunities
- Assisting in the classroom: \_\_\_adult classes \_\_\_children’s classrooms
- Art League Library assistance
- Outreach- catalog distribution to public libraries, etc.
- Mailing help
- Arts and Crafts Fair events
- Helping in the Gallery

**Other:**

Have you taken classes at ALLI – if so, which?

Why do you want to volunteer at ALLI?

What other volunteer work have you done?

Please list the names of two references that we may contact (other than family members):

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

For volunteer positions assisting in the classroom:

I hereby consent to permit the Art League of Long Island to contact anyone it deems appropriate to investigate or verify any information in reference to my suitability for a volunteer position.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Have you ever been convicted of a crime? If yes, please explain:

I certify that the answers given by me to all questions on this application are to the best of my knowledge,

Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*Please understand that this is an application for and not a commitment or promise of volunteer opportunity.*

## Education Program Volunteer Policy Form

Name \_\_\_\_\_ Date \_\_\_\_\_

*In case of emergency please contact:*

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Thank you for your interest in Volunteering at the Art League of Long Island!**

**Please read this information sheet carefully and sign below:**

### **Volunteer Responsibilities:**

**Volunteers of the Art League will be expected to ...**

- Have a positive attitude and maintain an appropriate appearance in their duties.
- Follow the Art League's policies and procedures.
- Contact office in advance in the event of a schedule conflict.
- Abide by the code of ethics and confidentiality. Art League volunteers must hold in strict confidence all information that they acquire through their work. This confidentiality is to be enforced both within and outside the organization. Confidentiality is the ethical responsibility of every volunteer.

***The Art League reserves the right to discontinue volunteer relationship due to failure to abide by Art League policies or expectations.***

**I acknowledge my responsibility to adhere to the policies of the Art League of Long Island Volunteer Program.**

Signature \_\_\_\_\_ Date \_\_\_\_\_