

**M Northwest Museum
of Arts and Culture**

VOLUNTEER/INTERN INFORMATION FORM

Name: _____

Mailing Address: _____

City, State, Zip Code _____

Telephone: _____

Email Address: _____

Availability (Days and Hours): _____

Type of Volunteer/Intern Opportunities That May Interest You:

- Youth Education Programs
- Campbell House Docent
- Gallery Interpreters
- Special Events & Programs (ArtFest, Mother's Day Tour, Weekend Public Programs)

BACKGROUND INFORMATION

1. Reasons for seeking volunteer or internship opportunities with us:

2. Formal Education & Special Skills (college, languages, certifications ex. First Aid, MAST)

3. Relevant Work Experience (Please Attach a Resume to Provide More Information):

4. How did you hear about volunteering at the museum?

5. Please Provide Two People We May Contact in Case of an Emergency:

Name and Relationship _____

Home and/or Cell Phone Numbers _____

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Home and/or Cell Phone Numbers _____

Criminal Background Acknowledgement and Verification: The MAC requires a Background Check for all volunteers.

VOLUNTEER/INTERN CONSENT FOR REFERENCE & WASHINGTON STATE PATROL BACKGROUND CHECK

I do hereby give the Eastern Washington State Historical Society/Northwest Museum of Arts & Culture permission to inquire into my educational background, references, driving record, police records, employment and/or volunteer history. I further give permission to the holder of any such records to release the same to the Eastern Washington State Historical Society/Northwest Museum of Arts & Culture.

I do hereby hold the Eastern Washington State Historical Society/Northwest Museum of Arts & Culture harmless of any liability, whether civil or criminal, which may arise as a result of the release of this information about me. I further hold harmless any individual, agency, business, or corporation that provides information or documents to the Eastern Washington State Historical Society/Northwest Museum of Arts & Culture. I understand that the Eastern Washington State Historical Society/Northwest Museum of Arts & Culture will use this information as part of its verification of my volunteer/internship application and periodically for evaluation purposes.

Full Name [Please Print]

Signature

Date of Birth

Please Email Your Completed Application To:
Angela.Ferguson@northwestmuseum.org

Or Mail to:
Northwest Museum of Arts and Culture
2316 W. First Avenue
Spokane, WA 99201
Attn: Volunteer Coordinator