For Office Use Only:									
ID #:			Date R	Date Received:					
Interview scheduled:				CRC Received			CAR Received		
Nova Scotia Museum of Natural History Volunteer Application *Placement is not guaranteed									
Contact Information									
First Name: Las			ast Name:						
Current Address									
Address:			City:						
Province:		Postal Code:	I Code: Country:						
Permanent Address (if	different from	n above)							
Address:		1	City:	r					
Province:		Postal Code:		Country:					
Telephone: (Daytime) (Evening)									
Email:									
Name of Emergency Co	ontact:								
Relationship:				Te	lepho	one:			
General Information	on								
 What Volunteer Program are you applying for: Youth Volunteer Program – age 15 to 17 years of age (Public Programs positions) Adult Volunteer Program - age 18 years of age and up (Public Programs and/or School Program Instructor positions) *Please note: Persons under 15 years of age are not permitted to volunteer. Please check the Volunteer position desired: 									
 School Program Instructor – commitment of approx. 3 hrs per shift, generally once per week assisting with the instruction of elementary school classes 									
Public Programs Assistant – commitment of 4 hrs per shift assisting staff with program and interpreting galleries									
How did you become aware of volunteering at the Nova Scotia Museum of Natural History? Website Events Guide Museum Staff Friend or Family Member Other (describe): Image: Staff									
Availability: (Please state when you would be available to volunteer.)									
Monday Tu	uesday	Wednesday	Thurso	lay	F	Friday	Saturday	Sunday	
Afternoon A		 Morning Afternoon Evening 	Morni Afterr	ioon [Aorning Afternoon	Morning Afternoon	Morning Afternoon	
What time of year would you be able to volunteer? Summer Seall Winter Spring Anytime									

Background and Experience								
Communication Skills (Describe your experience working with the following) Adults:								
Youth:								
Do you have public speaking experience? (If yes please explain)								
Language: 🗅 English		ther:						
Education (Please outline your educational experiences to date.)								
Level: D High School - H	ighest grade Completed:	University	Other:					
Details:								
Employment Experience	(Briefly describe past and presen	t experiences.)						
Volunteer Experience								
Organization	Position/Duties	Dates	Comments					
Interests & Skills								
Why are you interested in volunteering at the Nova Scotia Museum of Natural History?								
What aspects of natural and/or cultural history are you especially interested in? Plants Animals Earth Science & Fossils Environmental Science Marine Studies Astronomy Archaeology Local Cultural History Other (Please describe): Please describe any hobbies, training, interests or skills that you think would be relevant.								

References (Please provide three current references. Family members are not acceptable references.)							
1	Name:						
	Relationship:	Occupation:					
	Address:	City:					
	Telephone: (Daytime)	(Evening)					
	Email:						
2	lame:						
	Relationship:	Occupation:					
	Address:	City:					
	Telephone: (Daytime)	(Evening)					
	Email:						
3	ame:						
	Relationship:	Occupation:					
	Address:	City:					
	Telephone: (Daytime)	(Evening)					
	Email:						
	The Museum of Natural History requires the submission of three (3) references with a volunteer application. The museum will not contact the references without permission from the applicant. After the completion of a volunteer interview, a written signature will be required to grant authorization to the museum to contact the references provided. The written signature will also provide authorization to conduct a Criminal Records Check and Child Abuse Registry Check.						