



## Studio Arts/Events/Concessions Representative Volunteer Application

Date

Name

Email

Address

City

State

Postal Code

Phone Numbers

Type

Preferred Contact Method

Email

Phone

Text to phone

**For which volunteer position are you applying?**

**Studio Arts Representative**

**Event/Concessions Representative**

**Office Volunteer**

How did you learn about this volunteer opportunity?

1. Are you a member of Smithsonian Associates? \*      Yes      No

If yes, for how long?

2. How do you plan to commute to your volunteer activities?

3. Describe your past and present volunteer experience you have (where, when, what did you do?)

4. Tell us about your most recent work experience, including place of employment, title, and your general responsibilities:



5. What skills do you have that you feel would be helpful to this position?

6. What have you enjoyed most about your work and volunteer efforts? What would you not like to repeat doing?

7. Do you have any hobbies or special interests that relate to Smithsonian Associates' program offerings, such as in travel, history, art, science, music, etc.?

8. Why are you choosing to apply to the Smithsonian Associates volunteer program?

9. What do you want to gain from the experience? What will make you feel like it is worth your time to volunteer with the programs or classes?

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## Availability

**Event/Concessions Rep volunteers** must contribute a minimum of 40 hours annually to maintain an active status. This generally equates to a monthly two hour concessions shift on a re-occurring weeknight (ex. 2nd Monday night, or 4th Wednesday night, etc.) and a program shift, which varies from being a weeknight program, weekday program, or an all day Saturday seminar of your choosing.

**Studio Arts Reps** commit to volunteering three out of the four semesters a year and be willing to accept course assignments in two or more of the following times:

1. Weekday mornings;
2. Weekday afternoons;
3. Weekday evenings;
4. Weekends

Please indicate below the days of the week that you routinely could work (vacations and other commitments notwithstanding) and hours you could be available.

	AM	PM	Evening (after 5)
<b>Sunday</b>			
<b>Monday</b>			
<b>Tuesday</b>			
<b>Wednesday</b>			
<b>Thursday</b>			
<b>Friday</b>			
<b>Saturday</b>			



## References

Please list two references (non-relatives) whom you have known for at least two years, whom we may contact.

1. Name

Relationship

Phone

Email

2. Name

Relationship

Phone

Email

## How to Return this Form

1. Save your completed application and email it to [volunteer@smithsonianassociates.org](mailto:volunteer@smithsonianassociates.org).
2. If you wish to return it by mail, call Jenna Jones at 202-633-8596 for the mailing address.

## Have questions?

Contact Jenna Jones by phone at 202-633-8596 or by email at [volunteer@smithsonianassociates.org](mailto:volunteer@smithsonianassociates.org).

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