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**VOLUNTEER  
CODE OF ETHICS**

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**ART & HISTORY MUSEUMS  
MAITLAND**

**NAME:** \_\_\_\_\_, Nickname: \_\_\_\_\_

**CONTACT INFORMATION**

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_, Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_, Email: \_\_\_\_\_

**SAFETY INFORMATION**

In Case of an Emergency, Contact: \_\_\_\_\_

Relationship to Volunteer: \_\_\_\_\_

Home Phone: \_\_\_\_\_, Work Phone: \_\_\_\_\_

Medical/safety issues A&H should be aware of include: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BACKGROUND INFORMATION** (attach resume if necessary)

**Academic Experience**

School Name	Degree/Course of Study	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Employment Experience**

Company Name	Job Title	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Volunteer Experience**

Organization Name	Volunteer Position/Activity	Dates
Organization Name	Volunteer Position/Activity	Dates
Organization Name	Volunteer Position/Activity	Dates

**Special Skills and Talents** (i.e. computers, writing, photography, clerical, foreign language, fine arts, etc., etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever plead guilty to or been convicted of a crime?  NO,  YES

If "yes," please explain: \_\_\_\_\_

\_\_\_\_\_

Are you willing to complete a criminal background check?  NO,  YES

**VOLUNTEER INFORMATION**

Volunteer Availability (check all that apply)

Time/Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Volunteer Activity Interests (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Administrative Aide            | <input type="checkbox"/> Exhibitions Aide           |
| <input type="checkbox"/> Collections Aide               | <input type="checkbox"/> Facilities Aide, Caretaker |
| <input type="checkbox"/> Communications Aide            | <input type="checkbox"/> Facilities Aide, Gardener  |
| <input type="checkbox"/> Development Aide, Fundraiser   | <input type="checkbox"/> Guest Services Aide        |
| <input type="checkbox"/> Development Aide, Grant Writer | <input type="checkbox"/> Rental Aide                |
| <input type="checkbox"/> Education Aide                 | <input type="checkbox"/> Researcher                 |

I certify that I am at least eighteen years of age and that the information provided on both sides of this form is accurate, complete, and been given voluntarily (If under eighteen years of age, a parent or guardian signature is required below). I understand that this information may be disclosed to any party with legal and proper interest, and I release Art & History Museums – Maitland and its respective trustees, officers, employees, volunteers, agents, legal representatives and assigns from any liability whatsoever for supplying such information. I understand that I will not be paid or otherwise financially compensated for my services as a volunteer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date