



**NSU ART  
MUSEUM**  
FORT  
LAUDERDALE

**One East Las Olas Blvd.  
Fort Lauderdale, FL 33301**

**PERSONAL INFORMATION-PLEASE PRINT LEGIBLY**

Last Name:		First Name:		Middle Name:	Suffix (if any):	Preferred First Name:	
Current Address:			City:	State:	Zip Code:	Country:	
Primary Contact Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell		Other Contact Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell		Email Address: _____			
Birth Date:	Birth City and State		Gender:	Are you currently a student <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, where?			
Are you currently employed? <input type="checkbox"/> No <input type="checkbox"/> Yes							
<i>*All volunteers must be 16 yrs. or older and are required to be fingerprinted by NSU Prior to being accepted into the Volunteer Program (scheduled by the Volunteer Coordinator)*</i>							

**EMERGENCY INFORMATION**

Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Other <input type="checkbox"/>	Last Name:	First Name:	Phone Number with Area Code:
Emergency Contact's Relationship to you:		Physician's Name /Phone Number:	

**AFFILIATION INFORMATION/EXPERIENCE**

- Do you have volunteer experience at NSU Art Museum or any other organization?  No  Yes If yes, please complete below:
  - Name of organization: \_\_\_\_\_
  - Indicate dates of volunteer service: \_\_\_\_\_ to \_\_\_\_\_
  - Department where you volunteered: \_\_\_\_\_
- List the name(s) and department(s) of any family members employed at NSU:  
\_\_\_\_\_

## EDUCATION AND TRAINING

**Relevant Education (If a student, indicate academic affiliation and grade status (for example, high school senior, college sophomore):**

**Volunteer Interests (Please Check)**

Gallery Assistance     Museum Store & Café     Art Academy     Special Events – i.e. Exhibition Openings, Family Days

Specify Other \_\_\_\_\_

Please list any foreign language skills: \_\_\_\_\_

**Computer Skills –Please indicate your level for the program listed below**

MS Word:                       Beginner  Intermediate  Proficient

MS Excel :                     Beginner  Intermediate  Proficient

MS PowerPoint               Beginner  Intermediate  Proficient

Adobe Photoshop          Beginner  Intermediate  Proficient

## AVAILABILITY

I am available to volunteer at the following times:

Weekdays    Evenings (Thursdays – 8:00 p.m.)    Weekends

Please specify hours & days available: \_\_\_\_\_

Are there specific dates that you are **not** available? \_\_\_\_\_

When can you begin volunteering? \_\_\_\_\_

As a volunteer of the NSU Art Museum, I will:

***Be punctual & responsible and will contact a staff member if I cannot serve my assigned time. Conduct myself with dignity & courtesy. Consider all information, read or heard, to be highly confidential. Take any problems or criticisms to the appropriate NSU Art Museum staff member. Uphold the operating business standards & policies of the NSU Art Museum.***

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## REFERENCES

Name:	Relationship:	Email Address:	Phone Number:

