



Louisiana Art & Science Museum Volunteer Job Application

If you like to visit LASM, you will love to volunteer here. From hanging exhibitions to working with school groups, there are a number of ways to share your talents with us.

Personal Information:

Name (Mr.)(Mrs.)(Ms.): _____ Date: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

May we contact you via email: Yes No Are you a member of LASM? Yes No

What Are Your Interests

My interest is in art. I would like to help:

- In Discovery Depot Guide tours through the galleries
- Assist with school group classes
- Other _____

My interest is in science and/or astronomy. I would like to help:

- In Science Station In Solar System Gallery
- Assist with school group classes
- Other _____

I have reasonable clerical skills. I would like to help:

- File Stuff envelopes for bulk mail or compile packets
- Answer phones Enter computer data
- Other _____

I love parties. I would like to help:

- With receptions and special programs With the annual gala fundraiser (fall)
- With decorations (paint, glue, installing) Driving to pick up various items
- Soliciting businesses or individuals Invitation processing
- Selling memberships
- Other _____

Additional Information

Skills/Abilities:

Present Employment:

Full time Part time May we call you at work? Yes No

Previous/present volunteer jobs:

References:

Please list three (3) professional references (employers, teachers, etc.).

Name	Relationship	Phone
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever been convicted of or pleaded guilty or no contest to a crime? Yes No

If yes, date of conviction or plea: _____

State/Parish: _____

Describe circumstances: _____

Service Requirements

If you are here through a community service program (school, club or organization) please indicate the following:

Agency: _____ Phone: _____

Address: _____

City: _____ State: _____ ZIP: _____

Contact name: _____ Title: _____

Required number of volunteer hours: _____ Completion date: _____

Availability

Please indicate best days and times.

Weekdays Monday _____
 Tuesday _____
 Wednesday _____
 Thursday _____
 Friday _____

Weekends Saturday _____
 Sunday _____

My schedule is flexible. Call as needed.

Signature

Date

Signature of legal guardian if applicant is under 18 years of age

Date

I certify that the above information is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation or omission of information on this form or relating to my volunteer application may result in my denial of volunteer work or my immediate dismissal. I hereby authorize the company or its agents to confirm all statements contained in this application to the extent permitted by federal, state, or local law. I release all parties' from any liability arising out of his provision and the use of such information.