

VOLUNTEER APPLICATION

The McMichael Volunteer Committee contributes significantly to the success of the McMichael Canadian Art Collection and we appreciate your interest in joining our volunteer team. Please return this application to the Volunteer Committee Recruitment Chair in person or by mail to McMichael Canadian Art Collection or by email to **hr@mcmichael.com**.

Contact Information:

Please check:

Mr. Mrs. Ms. Dr. Other (please indicate) _____

Name _____

Address _____

City _____ Postal Code _____

Telephone Home _____ Cell _____ Work _____

Email _____

Are you over the age of 18? Yes No When is the best time to contact you? _____

Experience:

Currently Employed? Yes No Retired

Occupation _____

Responsibilities _____

Employer (optional) _____

Current University/College Student: Yes Institution _____

Area(s) of Study: _____ Graduation Year: _____

Previous Volunteer Experience No Yes If yes, please fill in the information below.

I. Organization _____ Years of service _____

Roles and responsibilities _____

II. Organization _____ Years of service _____

Roles and responsibilities _____

Languages spoken: English French Other(s) _____

Volunteers agree to maintain a current membership in the McMichael Canadian Art Collection.

Are you currently a member of the McMichael Canadian Art Collection? Yes No

Why did you choose to apply to become a McMichael Volunteer?

Please number your three areas of interest in order of preference.

- | | |
|--|--|
| <input type="checkbox"/> <u>Gallery Tour Docents</u>
Primarily weekends for adult groups | <input type="checkbox"/> <u>French Language Program Support</u> |
| <input type="checkbox"/> <u>School Program Docents</u>
Primarily weekdays | <input type="checkbox"/> <u>Events and Programs Support</u>
Performances, Gala, Receptions,
Previews, Members' Lounge Attendants |
| <input type="checkbox"/> <u>Member / Donor and Customer Service</u>
Membership and Information Desk,
Administrative support for Membership | <input type="checkbox"/> <u>Creative Learning and Public Programs</u>
Program support, Studio facilitator,
Performances, Ambassadors |
| <input type="checkbox"/> <u>Library/Research Support</u>
Library support, Resource development | <input type="checkbox"/> <u>Volunteer Committee Projects</u>
e.g. Annual Autumn Art Sale |

Please check your time for volunteer availability.

Weekdays Weeknights Weekend days Weekend evenings

References:

Please provide two references (other than family) with contact information to be contacted by the Membership Chair or Committee. Please receive permission before submitting your references.

REFERENCE ONE: Name _____
Address _____ Apt. _____
City/Town _____ Postal Code _____
Telephone Home _____ Cell _____

REFERENCE TWO: Name _____
Address _____ Apt. _____
City/Town _____ Postal Code _____
Telephone Home _____ Cell _____

Terms of Engagement:

- Attend Volunteer Committee General Meetings, gallery exhibitions, tours and programs whenever possible.
- Choose and actively participate in one or more areas of interest.
- Complete the required training successfully.
- Maintain a current membership in the McMichael Canadian Art Collection.
- Pay yearly dues to the Volunteer Committee.
- Follow all current procedures, guidelines, bylaws and policies of the Volunteer Committee and the McMichael Canadian Art Collection.
- Submit a police check or a Vulnerable Sector Check.

The information gathered is used to determine eligibility for a volunteer placement. By completing and submitting this form, I agree that all information provided here is correct. I understand that misrepresentation will result in rejection of the application or removal from the McMichael Volunteer Committee. Applicants will be contacted for an interview. I understand that final acceptance is at the discretion of the McMichael Canadian Art Collection and the Volunteer Committee.

Signature _____ **Date** _____