



Application for Volunteers and Interns

Today's Date:

Personal Information

Name:

Address:

City:

State:

Zip:

Home Phone:

Work Phone:

Cell Phone:

Email:

Why are you interested in volunteering? Personal interest Educational Internship

Community Service Hours Court ordered Other _____

Age ____ over 18 ____ under 18

Have you ever worked or do you currently work for the Fire Museum of Memphis (FMOM)?

Do you have a valid driver's license?

Do you have a car available for use while volunteering?

Experience and Education

What is your educational/training background?

What is your employment history?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

Does your current employer have (check all that apply): Program for volunteering

Donation matching program Grant preference to organizations where you volunteer

Your Interests at the Fire Museum of Memphis

How did you learn about the FMOM? Ad Website School FMOM Employee

Current Volunteer Other *Please specify* _____

Fire Museum of Memphis

Phone: 901-636-5650

Fax: 901-529-8422

118 Adams Avenue (Memphis Firefighters Avenue)

Email: info@firemuseum.com

Which opportunities do you wish to further explore: Historical Clerical Educational
 Grant Writing Bookkeeping Gift Shop Admissions Maintenance and Upkeep
 Children's Birthday Parties
 Other _____

How long can you commit to volunteering? One time Occasionally 3-6 months
 6 months or more Other _____

What days are you available? Mondays Tuesdays Wednesdays Thursdays Fridays
 Saturdays Sundays

What times are you available? Mornings Afternoons Evenings

Do you prefer to work (check all that apply) Directly with people served Behind the scenes
 Computers Maintenance No preference

Hobbies/interests:

Skills you would like to use while volunteering:

Other languages you speak _____ Basic Conversational Fluent
_____ Basic Conversational Fluent

Do you have any special needs or restrictions we should be aware of?:

Date you can begin service:

Criminal History

All volunteer positions require a Criminal History check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony? Yes No
If yes, explain.

Please describe in 3-5 sentences why you want to be a volunteer or intern at the Fire Museum of Memphis

Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

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The Fire Museum of Memphis considers applicants for internships/volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship.

AUTHORIZATION AND AGREEMENT BY APPLICANT

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I consent to having the Fire Museum of Memphis complete a criminal background check prior to volunteering.
3. I agree to complete a drug screening and TB screening requirements relevant to the position for which I am applying

Signature of Applicant

Date

Parent/Guardian Signature (required if less than 18 years of age)

Date

DRUG AND ALCOHOL TESTING CONSENT

The Fire Museum of Memphis recognizes the costs to society and to individuals from drug and alcohol use. The Agency maintains a firm commitment to strive to provide reliable service to its clients and a safe and healthy work environment for its interns/volunteers. While the vast majority of interns/volunteers are not involved with alcohol abuse or illegal drugs, those who are can have an adverse impact on the workplace, as well as their own job performance. To meet our obligations, and to comply with our obligation under the Drug Free Workplace Act of 1988, the following policy has been adopted and will be enforced:

1. The Agency prohibits the unlawful use, sale, possession, manufacture, distribution, or being under the influence of alcohol, drugs or any controlled substance, on Agency property, in the presence of Agency clients, while on duty, during rest periods and break periods, while operating an Agency vehicle or attending an Agency-sponsored event.
2. Interns/Volunteers who violate this prohibition will be subject to disciplinary action, up to and including termination. Nothing in this policy restricts the Agency's right to terminate an intern/volunteer at any time, with or without notice, for any reason not expressly prohibited by law.
3. The agency retains the right to require any intern/volunteer to report for drug and/or alcohol testing for reasonable suspicion or following an accident in which there is injury to persons or damage to property.
4. Interns/volunteers must abide by the terms of this statement and must notify the employer of any criminal drug conviction within five days of the conviction if workplace conduct is involved.
5. New interns/volunteers will be required to report for drug testing after a placement offer has been made but before reporting for the assignment.

I have read and understand the Drug Free Workplace Compliance Statement. I agree to comply with the Fire Museum of Memphis Drug and Alcohol Policy. I understand that any offer of placement with the Agency may be contingent upon the successful completion of drug testing before beginning assignment, and I consent to testing according to the Fire Museum of Memphis policy.

Signature of Applicant

Date

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Date



Volunteer Reference Check

_____ is applying for a Volunteer/Intern position with the Fire Museum of Memphis and has listed you as a reference. Please assist us returning this completed form to the Community Relations Manager.

Reference:

Name: _____ Title: _____

Affiliation: _____

Please describe your relationship with the applicant and the number of years/months you have been acquainted:

What are some of the applicant's greatest strengths?

What are some of the applicant's greatest challenges?

If applicable, would you recommend this person to volunteer with children? Yes _____ No _____

Please explain: _____

Please provide a phone number where we can best reach you: _____

Signature _____

Date _____



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