



## Availability

Please indicate your availability:

	Mornings	Afternoons	Evenings
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holidays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other \_\_\_\_\_

**Commitment:**

- Short term – 3 months; 24 hours minimum
- Long term – 6 months; 8 hours/month minimum

## References

Please list the names, addresses, and phone numbers of three persons you would like to use as references. List only people you have known at least one year. References may not be family members. Previous organizations you have volunteered for are recommended.

Name	Address/City/State/Zip	Phone Number	Email Address

## Agreement and Signature

I give Wheel and Cog Children’s Museum of Hutchinson permission to use images and video footages:

- Yes
  No

In connection with my application as a volunteer/employment for Wheel and Cog Children’s Museum, I understand that a background check may be performed. I certify that the information above is true and accurate to the best of my knowledge. All information shall be kept confidential.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date