

VOLUNTEER APPLICATION

Name					
Permanent Address					
City	State		Zip		
Daytime phone Evening phone					
Email					
Emergency contact					
Relationship	Phon	ne (day)			
Are you current employed	d? □ Yes □ No □ Retin	red			
If yes, company name and	d address				
Student status □ Full-ti	me □ Part-time □ Not a	ı student			
If yes, name of school cu	rently attending				
Address at school (if diffe	erent from permanent ad	dress above)			
Completed level of educa	tion				
☐ Current high school stu	dent □ HS diploma/GE	D			
□ Some college □ Bache	elor's degree Master's	or higher-level degree			

indicate your availabi	ility (day and ho	urs) to volunteer belo	ow:				
□ Monday							
□ Tuesday							
□ Wednesday							
□ Thursday							
□ Friday							
Desired start date							
Please check all areas	s of interest						
\Box Collections \Box	Data entry	□ Education	□ Library	□ Marketing			
□ Fundraising □	Membership	□ Public Programs	□ Photography	y Research			
□ Other							
Do you have any experience volunteering? □ Yes □ No							
If yes, indicate when	you volunteered	·					
Please describe your	duties						
Do you have any spec	cial interests, ho	bbies, or skills?					

Volunteer opportunities are available Monday through Friday from 9 a.m. to 5 p.m. Please

Please submit your completed application to:

Nicole Osier

Human Resources Assistant The Strong One Manhattan Square Rochester, NY 14607 585-410-6356

email: nosier@museumofplay.org

Thank you for your interest in volunteering at The Strong!