

WATERWHEEL HERITAGE PARK

WATERWHEEL HISTORIC TRUST



VOLUNTEER APPLICATION FORM

Surname: _____

First name: _____

Title: _____

Date of birth: _____ (optional)

Address: _____

Home phone: _____

Work phone: _____

Mobile: _____

e-mail : _____

SKILLS AND EXPERIENCE

Current employment

(Please tick)

- Self Employed
- Employed: F/T, P/T
- Home duties
- Student
- Retired

Previous work experience:

Volunteer work experience:

Special skills or qualifications:

Are you taking part in any course of study at present?

Please give details:

Interests or hobbies:

Please list any languages spoken other than English:

Are you familiar with Maori language and protocol?

BACKGROUND INFORMATION

Please list the reason/s why you are interested in volunteering:

Do you prefer to work on your own, or as part of a team?

Have you ever worked or volunteered for a Museum, Tourism or Educational Facility before?

Yes **No**

AVAILABILITY FOR WORK

Please tick preferred times:

	MON	TUES	WED	THURS	FRI	SAT	SUN
AM							
PM							

Please indicate if your preference is daily, weekly or fortnightly:

Daily

Weekly

Fortnightly

Please indicate approximate hours you would like to volunteer per fortnight.

PREFERRED VOLUNTEER ACTIVITIES

What area/s of the Museum interest you most?

- Administration
 - Educational activities
 - Management Committee
 - Museum services
 - Project management
 - Restoration of exhibits
 - Tourism activities
 - Trade Skills-building project
 - Other (please specify)
-

Do you have any special health requirements, e.g. medication you need to have in an emergency or other considerations The Waterwheel should be aware of?

Yes

No

If yes, please list details: _____

Name, phone, number and address of next of kin in case of an emergency:

Have you ever been convicted of a criminal offence?

Yes No

If yes please detail _____

Please supply the name and contact details of two suitable referees:

Name (1) _____

Address _____

Phone _____

Your relationship to this person: _____

Name (2) _____

Address _____

Phone _____

Your relationship to this person: _____

Are you currently a member of a Museum:

Yes No

From time to time you may be required to undergo a security clearance solely because of the sensitivity of some of the information you may come to know about and because of the value and importance of the objects you may be working with. Volunteers will declare any conflicts of interest relating to collections, use of Museum intellectual or other property for personal gain, and other issues, as defined in the MAANZ Code of Ethics and Guide to Professional Practice.

I have checked my answers to your inquiries and confirm their accuracy. I have not withheld any material facts which would be of importance to the consideration of my application.

Signature _____

Date _____