

APPLICANT INFORMATION			
Name			
Street Address			Unit #
City	Province		Postal Code
Home Phone		Mobile Phone	
Email Address			

INTERESTS / AVAILABILITY			
	Area Placement	Typical Shifts	Minimum Commitment
<input type="checkbox"/>	Administration	Various between Monday - Friday, 9:00 am - 5:00 pm. Shifts average 3 hours.	1 year, 1-3 times a month.
<input type="checkbox"/>	Education (Docent / Library)	Various between Monday to Sunday, 9:00 am - 5:00 pm. Tours average between 1-2 hours.	2 years, 2-4 tours monthly. On-going training between September and June (2 hours every other Monday).
<input type="checkbox"/>	Film and Performance	Saturday matinee or Wednesday evening screenings. Shifts average 4 hours.	1 year, 1-2 times a month.
<input type="checkbox"/>	Membership Promotion	Various between Monday - Sunday, 9:00 am – 9:00 pm. Shifts average 3 hours.	1 year, 1-2 times a month.
<input type="checkbox"/>	Shop at AGH / Art Rental & Sales	Various shifts during Gallery opening hours. Shifts average 3-4 hours.	1 year, 2-4 times a month.
<input type="checkbox"/>	Special Events	Various shifts from Tuesday - Sunday, inclusive of daytime and evening shifts.	1 year, flexible schedule.
<input type="checkbox"/>	Visitor Services (Front Desk)	Various shifts during Gallery opening hours. Shifts average 4 hours.	6 months, 1 4-hour shift per week.
How did you learn about our Volunteer Programme? <input type="checkbox"/> AGH volunteer <input type="checkbox"/> Friend/Family <input type="checkbox"/> AGH Website <input type="checkbox"/> Other _____			
Are you currently a member of the Art Gallery of Hamilton? <input type="checkbox"/> Yes / <input type="checkbox"/> No			
Are you over the age of 18? <input type="checkbox"/> Yes / <input type="checkbox"/> No			

EDUCATION			
Name of Institution	Degree obtained / program	# of Years	Graduation Year

EMPLOYMENT / VOLUNTEER EXPERIENCE				<input type="checkbox"/> <u>I have attached a resume instead</u>
Name and address of Organization	Position	Period	Reason for leaving	
Function / Responsibilities				
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Function / Responsibilities				
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Function / Responsibilities				

REFERENCES			
Name	Telephone No.:	Relationship:	No. of years known:

CONDITIONS OF APPLICATION

The information I have provided is correct to the best of my knowledge and I understand that any misrepresentation will be just cause for rejection of this application or termination from the AGH Volunteer Programme.

I hereby consent and authorize the AGH to obtain information from my personal references and that no act of libel or damages shall be instigated by me against same by the release of such information.

I agree to sign a Waiver and understand that any offer of participating in the AGH Volunteer Programme will be conditional upon the criminal record declaration being satisfactory to the AGH. In the Education and Front Desk placement areas, I agree to obtain an additional Vulnerable Sector Screening security check with the Hamilton Police Services, for which the \$15 cost will be reimbursed by the AGH after three months of successful Volunteer involvement.

I agree that if accepted into the AGH Volunteer Programme I will become a Member of the AGH and attend the required Orientation Session(s). Please note: Financial assistance is available for AGH memberships, please enquire for more information.

Signature: _____ Date: _____

The Art Gallery of Hamilton and its Volunteer Committee thank you for your interest. A representative of the Volunteer Committee will contact you to advise you on the opportunities available and to arrange a mutually convenient time when you can attend the Gallery for an interview.

There are three ways to submit this application:

By E-mail attachment:
volunteering@artgalleryofhamilton.com

By Fax:
905-577-6940

By Mail:
AGH Volunteer Committee
Art Gallery of Hamilton
123 King Street West
Hamilton ON L8P 4S8