

**APPLICANT INFORMATION**

Name:	
Address:	
City:	
State:	
ZIP Code:	
Phone:	
Email:	

**EMERGENCY CONTACT**

Name:	
Relationship to You:	
Phone:	

**EDUCATION & WORK INFORMATION**

Student Status (if applicable):	<input type="radio"/> Full-time <input type="radio"/> Part-time Name of school currently attending: _____
Current school year (if applicable):	<input type="radio"/> Freshman <input type="radio"/> Sophomore <input type="radio"/> Junior <input type="radio"/> Senior <input type="radio"/> Graduate-level
Are you currently employed?	<input type="radio"/> Yes, company name and current job title: _____ <input type="radio"/> No <input type="radio"/> Retired

**ADDITIONAL QUESTIONS**

What is your desired start date?	
Opportunities are available Monday through Friday between 9 a.m. and 5 p.m. When are you available to volunteer? Select all that apply.	<input type="radio"/> Monday a.m. <input type="radio"/> Monday p.m. <input type="radio"/> Tuesday a.m. <input type="radio"/> Tuesday p.m. <input type="radio"/> Wednesday a.m. <input type="radio"/> Wednesday p.m. <input type="radio"/> Thursday a.m. <input type="radio"/> Thursday p.m. <input type="radio"/> Friday a.m. <input type="radio"/> Friday p.m.
How would you like to volunteer for The Strong? Select all that apply.	<input type="radio"/> Collections <input type="radio"/> Library & Archives <input type="radio"/> Education <input type="radio"/> Marketing & Public Relations <input type="radio"/> Exhibits <input type="radio"/> Membership Services <input type="radio"/> Fundraising <input type="radio"/> Public Programs <input type="radio"/> Guest Services <input type="radio"/> Other: _____

## VOLUNTEER APPLICATION

Do you have experience volunteering? If yes, please provide dates of the assignment and describe your duties:	
Special interests, hobbies, and skills:	
Please provide any additional information you wish to be considered as part of this application:	

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Please attach your **résumé** (if available) and a **letter describing your personal interests and reasons for wanting to volunteer at The Strong** to this completed application and send to:

**Human Resources**  
The Strong  
One Manhattan Square  
Rochester, NY 14607  
585-263-2700  
[hr@museumofplay.org](mailto:hr@museumofplay.org)

**THANK YOU FOR YOUR INTEREST IN VOLUNTEERING AT THE STRONG!**