



AGA Volunteer Application

(Please print clearly)

Today's Date _____

Thank you for volunteering at the Art Gallery of Algoma! As a volunteer you help the Gallery achieve the following mandate: *To deliver exhilarating intellectual experiences, artistic synergies, and educational opportunities. To create and nurture relationships and partnerships that enhance the vision. To provide a vibrant and inviting gathering place that connects artists with the community.*

Personal Information

Name _____

Full Address _____

Telephone _____

Email _____

Emergency Contact _____

Name and Telephone _____

Skills and Experience

Volunteer _____

Work (Please list your current or former employer) _____

Applicable skills (Computer, fine arts background, experience working with children) _____

Education

High School – grade level _____

College/University _____

Are you volunteering for volunteer hours? Yes ___ No ___



Volunteer Application continued...

Availability

Winter ___ Spring ___ Summer ___ Fall ___

Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___ Sat ___ Sun ___

Mornings ___ Afternoons ___ Evenings ___

Have you ever been convicted of a felony? Yes ___ No ___

Do you have a current police record check? Yes ___ No ___

Placement Areas

Special Events ___

Gallery Café ___

Volunteer Recruitment and event promotion ___

We ask that all our volunteers...

- Share an interest in the arts
- Believe in the AGA’s vision (To be the premiere cultural institution in Northern Ontario for visual arts that aspires to gain national recognition)
- Be at least 16 years of age (A parent or guardian must sign for youth under the age of 18)
- Participate in a Gallery orientation and training as needed

References *(please list persons other than relatives)*

Name _____ Contact _____

Name _____ Contact _____

I agree that all information I have provided is correct and up to date.

Signature _____ Date _____