



Art Gallery of
ALGOMA

Volunteer Application Form

Personal Information

Today's Date _____

Name:

Full Address:

Telephone:

Email:

Emergency Contact:

Emergency Contact Phone Number:

Skills and Experience

Volunteer Experience

Work (please list current employer or former employer)

Applicable skills (Computer, fine art background, working with children)

Education (Only if you are a student)

Highs School – Grade level _____ Age _____

College/ University _____

Are you volunteering for volunteer hours? Yes _____ No _____

Art Gallery of Algoma
10 East Street Sault Ste. Marie P6A 3C3
T: 705.297.0806 | F: 705.949.6261
www.artgalleryofalgoma.com



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ALGOMA

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

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

We ask that all our volunteers...

- *To share an interest in the arts*
- *To believe in the AGA's vision (to be the premiere cultural institution in Northern Ontario for visual arts that aspires to gain national recognition)*
- *To participate in a Gallery orientation and training as needed*
- *Be at least 16 years of age (depends on your tasks), a parent or guardian must sign this form for youth under age of 18)*

References (please list persons other than your relatives)

Name:

Contact Information:

Name:

Contact Information:

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

Signature _____ Date _____

Staff Note