



# Volunteer Application Form

Thank you for your interest in volunteering! Davis Studio welcomes adults and teens to volunteer for certain programs & activities.

Please fill out the following application and you will be contacted should a need arise.

Full Name: \_\_\_\_\_  
*First* *Last*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age: \_\_\_\_\_ Are you a minor?  Yes  No

How did you hear about Davis Studio?

Previous Volunteer  Previous Student  Online Search  Print Media

Word of Mouth  Other: \_\_\_\_\_

Have you ever been convicted of a crime or misdemeanor?  No  Yes

## Experience:

Please list any classes or camps you may have taken at Davis Studio: \_\_\_\_\_

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Please describe your previous experiences working with children:

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Please describe your previous experiences with art, design, or theater:

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**Personal Reference #1:**

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Personal Reference #2:**

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Areas of Interest:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Children's Class Assistant | <input type="checkbox"/> Children's Camp Assistant                 | <input type="checkbox"/> Event Volunteer                         |
| <input type="checkbox"/> Event Preparation          | <input type="checkbox"/> Studio Organization & Project Preparation | <input type="checkbox"/> Flyer & Poster Distribution Around Town |

Anything else you'd like to tell us about yourself?  
\_\_\_\_\_  
\_\_\_\_\_

We may request an interview or ask for additional information prior to scheduling you for a volunteer position. Thank you!

Please send this form to us at 916 Shelburne Road, South Burlington, VT 05403