## Minute Man National Historical Park Volunteer-In-Parks Application Please complete the information requested. Use the back or additional sheets if necessary

## **GENERAL INFORMATION**

Name	(Last)	(First)	(middle	Initial)	
Date of Birth Soc. Sec. #			`	,	
		guardiansoc. Sec. #			
ii unuei 16, name	or parent or g	uai ui aii			
Address					
		Zip			
Phone (daytime)_		Phone (nighttime)			
Why do you want	to volunteer a	t Minute Man National Park?			
	(s) of voluntee	<b>ED</b> r work you would like to do:  Maintenance	information desk		
<pre>computer operationdesktop publishing _web design _science/research</pre>		museum work slide file work library work	guided walks/talks exhibits/displays	guided walks/talks	
photography trail work writing		fund-raisinggardeningliving history demonstrations			
Please indicate yo	ur educational	background:			
		School name/location	Major Studies	Degree	
High School:					
Undergraduate:					
Graduate:					

List job experiences:
Dates worked:
Job Title:
Employer:
Duties:
Dates worked:
Job Title:
Employer:
Duties:
Dates worked:
Job Title:
Employer:
Duties:
Do you have any previous experience working as a volunteer?  If yes, describe:
Describe skills or experience you have relating to Minute Man and the work you want to do with us:
List interests, hobbies, memberships and personal qualifications:
Do you speak or write any foreign languages?
Have you ever been convicted of an offense against the law (other than minor traffic violations)? If yes, please list and describe. A conviction does not mean that you can not be accepted into our volunteer program.

Please list and describe any physical limitations that may affect your duties as a volunteer. (Some positions require outdoor work in varied weather conditions or require walking, hiking or standing for long periods of time.

When will		ole to work? Fro	To	To:					
What days	of the week ar	e you willing to	o work? (Please c	ircle)					
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
How many hours per week would you like to work?  Are these days/hours flexible?  Do you have a valid driver's license?  Do you have your own transportation?									
Do you nee	d assistance w	vith finding lod	ging?						
Are you willing to share quarters with others?									
	Perences (not r	ŕ	ve may contact:						
Business or	home address	s:							
Business or	home phone:								
Name:									
Business or	home address	s:							
Business or	home phone:								
Signature o	f applicant			Date		·			

Please return to: VIP Coordinator, Minute Man NHP, 174 Liberty Street Concord, MA 01742