

Teen Volunteer Application

Volunteer Information

Name _____

Date of Birth _____ Gender Male Female Other _____

Phone Number _____ Email _____

Address _____

School _____ Current Grade _____

Current/Past Volunteer Experience _____

Hobbies/Interests/Skills _____

Why do you want to intern at CSC? _____

Please check any areas you are interested in volunteering with:

Please specify your availability:

- Office Admin Assistant
- Special Events Assistant
- Summer Fun
- Visitor Services Assistant
- Programs Assistant
- Other _____

- Monday AM
- Tuesday AM
- Wednesday AM
- Thursday AM
- Friday AM
- Saturday AM
- Monday PM
- Tuesday PM
- Wednesday PM
- Thursday PM
- Friday PM
- Saturday PM
- Sunday PM

Parent/Legal Guardian Information

Name _____ CSC Member Yes No

Phone Number _____ Email _____

Is this your emergency contact? Yes No

If no, please fill out emergency contact information here:

Name _____ Relationship _____

Phone Number _____ Email _____

Reference Information

Please provide three references (you should have at least one teacher or school administrator as a reference):

Name

Email

Phone

I agree that, as a CSC volunteer, I will represent the Science Center in a positive and honest manner, and follow CSC policies and procedures to the best of my ability.

Applicant Signature/Date _____

Parent/Guardian Signature/Date _____