

Date: _____

Last Name: _____



THE HUNTINGTON
Library, Art Collections, and Botanical Gardens

High School Volunteer Application

(To be filled out by prospective high school volunteer)

Last Name _____ First Name _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone (____) _____ Cell Phone (____) _____

Email Address _____

Birthday: _____ Age: _____

Parent/Guardian _____ Relationship _____

Address (if different from above) _____

City _____ State _____ Zip Code _____

Email _____ Phone (____) _____

Parent/Guardian _____ Relationship _____

Address (if different from above) _____

City _____ State _____ Zip Code _____

Email _____ Phone (____) _____

Education

Name of School: _____ Graduation Year: _____

City: _____ Your current grade: 8 9 10 11 12

Do you need Community Service hours for school or a club? YES NO How Many? _____

Are you fluent in any languages other than English? _____

For Office Use Only

Rec'd App. _____ | Sent IntM: _____ | Acc: y n _____

HIGH SCHOOL VOLUNTEER PROGRAM

4 Month Minimum Commitment ~ Monthly hours of service will vary per program

How did you hear about the Volunteer opportunities at the Huntington?

Where did you get your application from? _____

Why do you want to volunteer at The Huntington?

Are there volunteer opportunities/projects at The Huntington that you have heard of or read about that you are particularly interested in?

As part of the High School Volunteer Program, participants are only allowed to miss three (3) shifts during their term. Will you be able to make that commitment? If you know of any dates that you will be absent, please indicate them below.

ACTIVITIES / SKILLS

Tell us about any hobbies or skills that you enjoy. What do you like to do for fun?

Have you volunteered for other organizations?

Organization – Position – Dates

Do you have work experience?

Place of employment _____

Jobs/Tasks _____

What do you hope to gain from a volunteer experience?

Is there anything else you would like us to know about you? Please feel free to be creative!

ACKNOWLEDGEMENT

The information in this application is true and complete, and I have not knowingly withheld any information. I understand that misrepresentation may be cause for dismissal. I authorize verification of all information contained in this application.

As a volunteer at the Huntington, I agree to follow all Huntington guidelines and policies. I am aware that the Huntington has the right to release me from service at any time, just as I have the right to withdraw from volunteer service at any time.

Signature of Volunteer _____ Date _____

Parent's Portion

I have read and understand this application and I give my child permission to be a volunteer at the Huntington. I accept full responsibility for my child's participation in this program and support my child and The Huntington in this commitment.

Signature of Parent or Guardian _____ Date _____



**Thank you so much for your interest in the Huntington!
I look forward to speaking with you soon.**

Jenny Long Vidar
Volunteer Programs Coordinator
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