

Douglas County Museum 123 Museum Dr. Roseburg OR 97471 541-957-7007



Volunteer Application

Please print legibly. Once you've completed this document, please return it to the museum you're applying to in person, by mail, or by email to musrecpt@co.douglas.or.us.

Thank you for your interest in volunteering!

Position Applying For:	Location:
Personal Information:	
Full Name:	
Address:	
Telephone:	
Email:	
Do you drive? Yes No	Driver's License #:
Relevant Experience:	
Most Recent or Current Employer:	Dates Employed:
Telephone:	May we contact them as a reference? Yes No
Responsibilities:	
Do you have any volunteer experience? Yes No	Type of volunteer work:
Please describe your volunteer experience:	

Education:			
High School:	Circle highest grade completed:		
		9 10 11 12	
City:		Graduation date:	
College/University:		Highest year completed:	
		1 2 3 4 5	
Degree/Certificate:		Graduation date:	
Other relevant credentials, c	ertifications or skills?		
Interests:		? Is there any particular area you'd like to volunteer in?	
Are there any particular skills	you'd like to learn while vo	olunteering for the museum?	
References:			
Name:	Telephone:	Relationship	
	·	esentative of Douglas County and that I am subject to the slize my responsibility to respect privacy and maintain	
Applicant Signature		Date	