

Date of Application:

**Personal Information**

Last Name:	First Name:	Middle Initial:
Address:		
City:	State:	Zip:
Home Phone:	Mobile Phone:	
Email Address:	How did you hear about Adler's volunteer program?	
Have you been convicted of a felony? Yes No All volunteers participate in a criminal history check. A record of conviction does not automatically disqualify you from volunteering.		Are you a member of the museum? Yes No

**Employment**

Employer:	City:	State:
Position:	Dates of Employment:	
Does your employer offer: (please circle if applicable) time-off program for volunteers    donation matching program    neither		

**Education**

Please circle the last year completed:		
High School: 1 2 3 4	College: 1 2 3 4	Graduate: 1 2 3 4
Last School Attended:		
Degree(s) Earned:	Major:	

**Volunteer Experience**

Organization:	City, State:
Position:	Dates on Involvement:
Responsibilities:	

### Volunteer Interests

Which of the following volunteer opportunities interest you? Check all that apply

#### Public Program Opportunities

- Space Visualization Lab Guide
- Spaceflight Gallery Guide
- Special Events Facilitator
- Summer Programs Demonstrator
- Summer Camp Assistant
- Telescope Facilitator

#### Behind the Scenes Opportunities

- Advancement Assistant
- Collections Volunteer
- Far Horizons Project Assistant
- Office Assistant
- Space Visualization Lab Developer
- Other: \_\_\_\_\_

### Availability Please check all that apply.

- | Monday                              | Tuesday                             | Wednesday                           | Thursday                            | Friday                              | Saturday                            | Sunday                              |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   | <input type="checkbox"/> Mornings   |
| <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons | <input type="checkbox"/> Afternoons |
| <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   | <input type="checkbox"/> Evenings   |

Do you have any special skills, interests, experiences, or languages that may be utilized during your volunteer experience?

Why are you interested in volunteering at the Adler Planetarium?

### Signature

I certify that the statements in this volunteer application are true and have been given voluntarily. If the information provided is untruthful, I understand that I will be released from the volunteering program. I realized that the information may be disclosed to any party with legal and proper interest, and that I release the agency from any liability for supplying such information, and I understand I will not be paid for my services as a volunteer, and that filling out an application does not guarantee acceptance into a volunteer position.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to:  
Maria Christus, Volunteer Program Manager**

Adler Planetarium  
1300 South Lake Shore Drive  
Chicago, IL 60605

Fax: 312.322.2257  
Email: [volunteer@adlerplanetarium.org](mailto:volunteer@adlerplanetarium.org)