



Japanese American National Museum
Volunteer Application

Instructions:

- a. Please answer ALL questions
- b. Please PRINT clearly and check (✓) all that apply; use black or blue ink or type your responses
- c. **Interviews by appointment only; NO WALK-INS**

Fax, mail, or deliver this application to:
 Japanese American National Museum
 369 East First Street
 Los Angeles, CA 90012
 Fax: 213-625-1770
 Email: volunteer@janm.org

Welcome and thank you for your interest in volunteering! The information you provide is confidential and is used for recruitment and placement purposes.

Application Date : _____ **Volunteer Position Applying For:** _____

Female Male **Age Group:** 18-30 31-40 41-50 51-60 61-70 Over 71

Program Requirements:

- 1. All volunteers are required to become Museum Members. Are you a current member? Yes No
 If yes, please provide membership # _____ If no, complete membership form and submit check.
- 2. Are you able to make the minimum commitment of 6/8 hours per month? Yes No
- 3. Are you willing to be trained and make the commitment to continuing education? Yes No
- 4. Are you able to commit to a designated day of the week? (see Page 3) Yes No
- 5. Are you in agreement with the Mission Statement of the Museum? (read below) Yes No

"The mission of the Japanese American National Museum is to promote understanding and appreciation of America's ethnic and cultural diversity by preserving, interpreting and sharing the experiences of Japanese Americans."

Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Retired Working Student Interested in Community Service Not working

Home Phone: _____ **Work Phone:** _____ **Pager/Cell Phone:** _____

E-Mail Address: _____

Best time to reach you: From: ___ a.m./ p.m. To: ___ a.m./ p.m. May we call you at work? Yes No

Employer/School: _____

(if retired, include name of former employer/company)

Degree or Certification: _____

Occupation and/or course of study: _____

If retired, from what career/profession? _____

Please detail your involvement in community organizations, clubs and other groups. e.g., memberships, level and areas of involvement, served on committees or boards?

References (Professional or Community Service)

Name _____ Relationship _____ Phone Number _____

Have you worked/volunteered with the Japanese American National Museum before? No: Yes:

(Area of service and when) _____

How did you hear about us? _____

Volunteer Interest, Experience and Skill Set From the list below, choose the area(s) in which you would bring experience, ability or interest. Our intention is to find a suitable placement for you according to the parameters you detail for us. The Museum provides additional training and volunteer support for some areas.

- | | |
|---|---|
| <input type="radio"/> Accounting / Bookkeeping | <input type="radio"/> Graphic Design |
| <input type="radio"/> Arts and Crafts | <input type="radio"/> Handyman |
| <input type="radio"/> Art History | <input type="radio"/> Human Resources |
| <input type="radio"/> Asian Studies /Ethnic Studies | <input type="radio"/> Journalism |
| <input type="radio"/> Bulk Mail/Mailing | <input type="radio"/> Library Research |
| <input type="radio"/> Business Administration | <input type="radio"/> Life History Interviewer |
| <input type="radio"/> Camp Experience | <input type="radio"/> Management/Executive |
| <input type="radio"/> Clerical Support | <input type="radio"/> Museum Docent Experience |
| <input type="radio"/> Community Involvement | <input type="radio"/> Museum-goer |
| <input type="radio"/> Computer Skills | <input type="radio"/> Office Manager |
| <input type="radio"/> Macintosh | <input type="radio"/> PC Compatible |
| <input type="radio"/> Scanners | <input type="radio"/> Photoshop |
| <input type="radio"/> MS Word | <input type="radio"/> Excel |
| <input type="radio"/> Powerpoint | <input type="radio"/> Access |
| <input type="radio"/> Data Entry | <input type="radio"/> Portraits |
| <input type="radio"/> Design: Graphic or Interior | <input type="radio"/> Events |
| <input type="radio"/> Dictation/Transcription | <input type="radio"/> Darkroom |
| <input type="radio"/> Education. Specialty: _____ | <input type="radio"/> Product |
| <input type="radio"/> Engineering. Specify: _____ | <input type="radio"/> B/W or Color Processing |
| <input type="radio"/> Entertainment. Specify: _____ | <input type="radio"/> Lighting |
| <input type="radio"/> Event Planning | <input type="radio"/> Specify mm format: _____ |
| <input type="radio"/> Executive Office Skills | <input type="radio"/> Public Programs/Events |
| <input type="radio"/> Exhibit Installation | <input type="radio"/> Public Speaking |
| <input type="radio"/> Filing | <input type="radio"/> Public Relations/Marketing |
| <input type="radio"/> Film Editing/Production | <input type="radio"/> Shipping/Receiving |
| <input type="radio"/> Food Services | <input type="radio"/> Special Events |
| <input type="radio"/> Fundraising | <input type="radio"/> Retail Sales |
| <input type="radio"/> Gallery / Exhibit Docent Experience | <input type="radio"/> Telephone/Reception |
| <input type="radio"/> General Office | <input type="radio"/> 10 Key |
| | <input type="radio"/> Translation Written/Spoken |
| | <input type="radio"/> Volunteer Experience |
| | <input type="radio"/> War/Veteran/Military Experience |
| | <input type="radio"/> Website Design |
| | <input type="radio"/> Writing/Editing/Proofreading |

Other areas of interest:

Below, please check the date(s) and shift time(s) you are available to volunteer:

- **6 hours/month minimum required for all volunteers**
- **8 hours/month minimum required for Museum docents**
- **If docents are unable to fulfill the shift requirements listed below, there will be a required minimum number of tours per month. This number is subject to negotiation and may affect your "Active Volunteer" status.**

Once a Week: <input type="radio"/>	Twice a Week: <input type="radio"/>			Twice a Month: <input type="radio"/>		Other: <input type="radio"/>	
Shift Time	Mon	Tue	Wed	Thur	Fri	Sat	Sun
9:45 am to 1:00pm							
12:45 pm to 5:00 pm							
5:00 pm to 8:00 pm							

Ethnic/Cultural Background (Optional):

Language(s) Japanese: Speak Read Write
 Spanish: Speak Read Write
 Other: _____ Speak Read Write Sign

Japanese Heritage (Optional)

My generation is : _____

Prefecture: (Grand)Father's Family: _____ (Grand)Mother's Family: _____

Camp: (Grand)Father's Family: _____ (Grand)Mother's Family: _____

Prefecture: (Self): _____

Are you or your relatives from Hawai'i? Yes No Area: _____

Emergency Information: Persons to contact other than your parents:

(1st Choice)Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

(2nd Choice)Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Special Instructions (Allergies, Medication, etc.): _____

I understand that my involvement and placement as a Museum volunteer remains the prerogative of the Volunteer Services Unit. Position availability is not guaranteed but dependent upon Museum needs. I understand that my involvement as a volunteer is at the discretion of the Japanese American National Museum's Volunteer Program.

Applicant Signature: _____

Date: _____

Volunteer Services Office Use Only

Interview Date: Interviewer:	Start Date:	Scheduled Day:	Membership: Confirmed with:
Classes: 101: Completion Date <hr style="width: 80%; margin-left: 0;"/> 102: Completion Date <hr style="width: 80%; margin-left: 0;"/> 103: Completion Date <hr style="width: 80%; margin-left: 0;"/>	120: Completion Date <hr style="width: 80%; margin-left: 0;"/> 121: Completion Date <hr style="width: 80%; margin-left: 0;"/>	130:Completion Date <hr style="width: 80%; margin-left: 0;"/> 131: Completion Date <hr style="width: 80%; margin-left: 0;"/>	Sexual Harassment: Completion Date <hr style="width: 80%; margin-left: 0;"/> Diversity: Completion Date <hr style="width: 80%; margin-left: 0;"/> Safety/Emergency: Completion Date <hr style="width: 80%; margin-left: 0;"/>
Nametag/Keycard:	Mentor Assignment:	Department Assignment: Staff Contact:	
Docent Special Circumstances Minimum # of Tours:			

369 East First Street Los Angeles, CA 90012 (213) 625-0414 Fax: (213) 830-5673
Office of Volunteer Services