



Oneida County History Center

1608 Genesee Street, Utica, NY 13502

www.oneidacountyhistory.org

315-735-3642 ochs@oneidacountyhistory.org

Volunteer Profile & Application

Complete both sides of this form and return to the address above.

Name:		Date:	
Street Address		City	State & Zip Code
Phone Number		E-mail	

How would you like to volunteer? Please check all that apply.

<input type="checkbox"/> Research Library	<input type="checkbox"/> Guest Services
<input type="checkbox"/> Collections	<input type="checkbox"/> Membership
<input type="checkbox"/> Digital Archives	<input type="checkbox"/> Office/Clerical
<input type="checkbox"/> Photo Identification	<input type="checkbox"/> Outreach
<input type="checkbox"/> Bookstore	<input type="checkbox"/> Programming
<input type="checkbox"/> Education	<input type="checkbox"/> Other _____
<input type="checkbox"/> Exhibits	_____
<input type="checkbox"/> Fundraising	

What experiences, qualifications, and skills can you share?

<input type="checkbox"/> Computer programs <input type="checkbox"/> Word, <input type="checkbox"/> Excel, <input type="checkbox"/> Google Chrome <input type="checkbox"/> Square POS <input type="checkbox"/> PastPerfect <input type="checkbox"/> Other _____	<input type="checkbox"/> Historical research
<input type="checkbox"/> Curatorial/archives	<input type="checkbox"/> Library
<input type="checkbox"/> Customer service/sales	<input type="checkbox"/> Photography
<input type="checkbox"/> Exhibit development	<input type="checkbox"/> Second Language _____
<input type="checkbox"/> Fundraising and/or grant writing	<input type="checkbox"/> Social media
<input type="checkbox"/> Genealogical research	<input type="checkbox"/> Teaching
<input type="checkbox"/> Graphic design	<input type="checkbox"/> Trade/construction skills _____
	<input type="checkbox"/> Writing/editing
	<input type="checkbox"/> Other _____

Educational Background

<i>Level</i>	<i>Institution/School</i>	<i>Degree Awarded</i>	<i>Date</i>
High School			
Undergraduate			
Graduate			
Other/Certifications			

Availability (check and list hours available)

<input type="checkbox"/> <i>Monday</i>	<input type="checkbox"/> <i>Tuesday</i>	<input type="checkbox"/> <i>Wednesday</i>	<input type="checkbox"/> <i>Thursday</i>	<input type="checkbox"/> <i>Friday</i>	<input type="checkbox"/> <i>Saturday</i>
Total available hours per week:					
Are there any limitations that may impact your ability to share your time?					

Emergency Contact

Name:	Relationship:
Phone number:	Email:

Signature of Applicant:	
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Volunteers are vital to our organization. Thank you for your interest!
Questions? Contact ochs@oneidacountyhistory.org or 315-735-3642

<i>For internal use only</i>	Date applied:	Date Started:
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