



Fort Gratiot Lighthouse Volunteer Application

Date:

Interviewed By:

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Availability

How often would you be available to volunteer?

Once a week Once a month Twice a month
 Other (explain) _____

During which hours are you available for volunteer assignments?

Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons

Interests

Tell us in which areas you are interested in volunteering

Clerical Aid Internship Gardens & Grounds
 Curatorial Assistant Museum Store Assistant Overnight Programs
 Docent / Tour Guide Newsletter Restoration (See pg. 3)
 Events Research Assistant Other
 Fundraising Maintenance

Site Preference: Fort Gratiot Lighthouse Thomas Edison Depot Main Museum
 Huron Lightship Kammer Cabin

Education

Please list your education experience.

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Please list any previous volunteer experience. List the most recent assignment first.

References

Have you been convicted of a felony within the last 5 years? Yes _____ No _____

If yes, please explain _____

Please name three unrelated parties that you would like to use as references. Please list name, address and phone number for each individual.

Name	Contact Information
1.	
2.	
3.	

Restoration and Preservation

Special Skills or Qualifications

Volunteers are needed for all levels of restoration and preservation of historic structures at the Fort Gratiot Lighthouse, Huron Lightship, Thomas Edison Depot, Carnegie Center and Kammer Cabin.

Summarize special restoration and/or preservation skills/qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

List your level of expertise (1-5):

- 1= Novice
- 2= Hobby
- 3= Working Knowledge
- 4= Employment
- 5= Licensed Contractor

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Carpentry | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Heating/Cooling | <input type="checkbox"/> Cleaning/Maintenance |
| <input type="checkbox"/> Drywall | <input type="checkbox"/> Flooring Installation | <input type="checkbox"/> Grounds Maintenance |
| <input type="checkbox"/> Roofing | <input type="checkbox"/> Insulation | <input type="checkbox"/> Other |

Are you willing to work at other sites: Yes No

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statement, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.