



## Docent Training Program Application

Please return to:

Harn Museum of Art  
Attn: Education Department  
PO Box 112700  
Gainesville, FL 32611-2700

Questions: (352) 392-9826 x153

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

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone (specify): \_\_\_\_\_

Email Address: \_\_\_\_\_

Best times to reach you: \_\_\_\_\_

Are you 21 years old or over? \_\_\_\_\_ Month/Day of Birth: \_\_\_\_\_

Are you available to volunteer: On weekends \_\_\_\_\_ On weekdays \_\_\_\_\_

Current Status (select all that apply):

- Student            If yes, where? \_\_\_\_\_
- Employed            If yes, where? \_\_\_\_\_
- Retired

Education: \_\_\_\_\_ Area of Study: \_\_\_\_\_

Professional background: \_\_\_\_\_

Special Skills (foreign languages, sign language, art, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you learn about the Harn Docent Program? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you currently a member of the Harn Alliance? \_\_\_\_\_

Briefly describe why you are interested in the Harn Docent Program: \_\_\_\_\_

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What experiences or background do you have that you feel is relevant to the program?

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In case of an emergency, who should be contacted?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list two references:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been convicted of a crime?     Yes     No  
If yes, please explain \_\_\_\_\_

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Volunteers often work closely with children who participate in programs at the museum. The museum has the highest concern for the safety and welfare of these children. What experiences have you had working with children?

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*I certify that all statements made on this application are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for providing this information and for your interest in the Harn Museum Docent Program.

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For office use only

Date received:

Interviewed by:

Comments:

Date Contacted:

Applicant accepted: