

**The Dalí  
Volunteer Application  
for Volunteer Service**



The Dalí Museum thrives because of its loyal members, whose support helps maintain the museum as an essential cultural and educational resource for everyone to enjoy.

1 Dalí Boulevard St. Petersburg, Florida 33701  
Telephone: 727.623.4778 Fax: 727.894-6068

**DIRECTIONS:** Please print legibly in black or blue ink only. The application must be completed in

**PERSONAL INFORMATION**

Applicant Name: \_\_\_\_\_  
Last First Middle

Title:  Mr.  Ms.  Mrs.  Dr.

Home Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Are you over the age of 18?  Yes  No

Will you be a year-round volunteer:  Yes  No

If NO, please provide us with your season contact information below:

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

City, State, Zip: \_\_\_\_\_

Seasonal Phone: \_\_\_\_\_ Valid During These Dates: \_\_\_\_\_

**Volunteer Availability** Please Check All That Apply

**Mondays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Thursdays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Saturdays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Tuesdays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Fridays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Sundays**

- Morning (11:30am-1:30pm)
- Afternoon (1:30-3:30)
- Evening (3:30-6:00)

**Wednesdays**

- Morning (9:30am-12:30pm)
- Afternoon (12:30-3:30)
- Evening (3:30-6:00)

**Areas of Interest:** Please Check All That Apply

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Development Assistant  | <input type="checkbox"/> Membership Concierge | <input type="checkbox"/> Special Events Assistant                |
| <input type="checkbox"/> Docent (requires acceptance into class and commitment to training) | <input type="checkbox"/> Office Assistant     | <input type="checkbox"/> Volunteer Services Department Assistant |
|   | <input type="checkbox"/> Visitor Concierge    | <input type="checkbox"/> Volunteer Committees                    |

Please briefly summarize your reasons for wanting to volunteer at The Dalí: \_\_\_\_\_

\_\_\_\_\_

What is your employment status:  Part Time  Full Time  Retired  Student

Education and Employment History: Please briefly summarize your educational background and past/current employment experience (attach resume if available). \_\_\_\_\_

\_\_\_\_\_

Volunteer History: Please briefly summarize your past/current volunteer experience.

\_\_\_\_\_

\_\_\_\_\_

**Skills:** Please check all that apply.

Please rate your level of computer proficiency:

- Beginner
- Intermediate
- Advanced

Check the computer software/applications you use:

- Email and Internet
- MS Office (Word, Excel, Power Point)
- Other: \_\_\_\_\_

Interest

- Customer Service/Hospitality
- Fine Arts/Crafts
- Library Science
- Public Speaking
- Research
- Sales/Retail
- Teaching/Training
- Second Language \_\_\_\_\_
- Other: \_\_\_\_\_

**Emergency Contacts:** Please provide us with names, phone numbers of two emergency contacts. At least two of the contacts should be residents of the St. Petersburg/Tampa area.

**Contact #1**

First & Last Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**Contact #2**

First & Last Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**Have you ever been placed in a pre-trial intervention (PTI) or a related program, placed on probation, fined, had to provide restitution to a third party, pled nolo contendere (no contest) or had adjudication withheld by any judicial or quasijudicial body for a felony or a misdemeanor (other than a minor traffic violation)?**

Yes

No

**If yes, please explain.** \_\_\_\_\_

As a volunteer, I agree to abide by all applicable rules and regulations of The Dalí volunteer program.

I certify that the information given by me to The Dalí is true and complete to the best of my knowledge. I understand that if I give false information or omitted information, volunteering may be terminated whenever the falsification or omission is discovered.

I agree to make every effort to fulfill my appointments for volunteer service at The Dalí and will notify the appropriate staff of The Dalí in advance when I am unable to do so.

I am aware that a background check may be conducted by the Museum as a provision of volunteer service at the Museum.

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

Mail or Fax completed application to:

The Dalí

Attn: Volunteer Services

1 Dalí Boulevard

St. Petersburg, FL 33701

Volunteer Office:

727-623-4778 Fax: 727-894-6068 Email: [pwhiteaker@thedali.org](mailto:pwhiteaker@thedali.org)



**To be completed by Volunteer Manager**

Date received: \_\_\_\_\_ Date contacted: \_\_\_\_\_ Date entered into RE: \_\_\_\_\_

Date entered onto mailing list: \_\_\_\_\_ Assignment: \_\_\_\_\_

Department(s) referred to: \_\_\_\_\_ Date: \_\_\_\_\_