



## Application for Volunteer Services

Betty Barker/Anita B. Richmond  
Children's Discovery Museum of the Desert  
71-701 Gerald Ford Drive Rancho Mirage, CA 92270  
760-321-0602 FAX: 760-321-1650 email: volunteer@cdmod.org

Name: (Last, First) \_\_\_\_\_

\_\_\_ Mr. \_\_\_ Ms. \_\_\_ Mrs. \_\_\_ Miss \_\_\_ Dr. Preferred Name \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

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

Why do you want to volunteer at CDMOD?

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How did you hear about our volunteer program?

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Have you ever volunteered elsewhere?

If yes, when and where?

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**CDMOD respects the diversity of our community and requires that our staff and volunteers also adhere to our policy of no discrimination on the basis of race, color, religion, values, ancestry, national origin or disability.**

Please list specific experiences you have had working with persons of diverse backgrounds, lifestyles, ethnic or cultural groups, ages, etc.

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**Your availability and interest:**

Please enter the times you are interested in volunteering. The museum is open 7 days a week Thanksgiving week through Labor Day. September to November, the Museum is closed Mondays.

Sun. \_\_\_\_\_ Mon. \_\_\_\_\_ Tues. \_\_\_\_\_ Wed. \_\_\_\_\_ Thurs. \_\_\_\_\_ Fri. \_\_\_\_\_ Sat. \_\_\_\_\_

Which volunteer positions interests you most:

- |  |   |
|--|---|
| <input type="checkbox"/> Education/Programming | <input type="checkbox"/> Early Childhood Programs |
| <input type="checkbox"/> Garden                | <input type="checkbox"/> Camp Volunteer           |
| <input type="checkbox"/> Administrative        | <input type="checkbox"/> Trike Track Volunteer    |
| <input type="checkbox"/> Museum Gallery        | <input type="checkbox"/> MakerSpace Volunteer     |

**Background**

**Education (check all that apply):**

High School/GED \_\_\_\_\_

Undergraduate Degree \_\_\_\_\_

School: \_\_\_\_\_ Major: \_\_\_\_\_

Graduate Degree \_\_\_\_\_

School: \_\_\_\_\_ Major: \_\_\_\_\_

**Employment Status:**

Employed     Unemployed     Retired     Student

Occupation:

\_\_\_\_\_

Former Employer or Retired from:

\_\_\_\_\_

Have you ever been convicted of a felony in the last ten years?    Yes    No

Do you have any objection to a background check/finger printing?    Yes    No

## References

Please list 2 people, other than relatives, who are willing to serve as personal references including, if applicable, someone for whom you have volunteered.

1. Name: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_
  
2. Name: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please list 2 of your closest living relatives, including your spouse or partner.

1. Name: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_
  
2. Name: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### **Please read and sign (application must be hand signed, not typed.)**

I certify that the information provided in this application is true and correct, and has been given voluntarily. I understand that this information may be disclosed to any party with legal and proper interest, and I release The Children's Discovery Museum of the Desert from any liability whatsoever for supplying such information. I understand that I will NOT be paid or otherwise compensated for my service as a volunteer. I agree to abide by any and all museum policies and understand that if I do not abide by the museum policies, rules and regulations, I may be dismissed from my position as a volunteer.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## **Volunteers and Staff**

The staff of the Children's Discovery Museum of the Desert (CDMOD) expects from you, as a volunteer, to agree to the following:

- To uphold and practice the mission of CDMOD and its program philosophy while engaging in any CDMOD activities.
- To conduct yourself professionally and in accordance with program policies.
- To respect the learning, safety and welfare of our visitors as your primary obligation.
- To recognize your own limitations, the need to take care of yourself, and give yourself permission to utilize staff for support and assistance.
- To serve as a volunteer for CDMOD for a minimum of 1 year/season and participate in any additional in-service training meetings.
- **Absences need to be reported as far in advance as possible. Three unexcused absences will be grounds for dismissal/evaluation.**
- To make all necessary efforts to communicate with staff when you are unable to fulfill a commitment for any assigned task or change in your activity level with CDMOD.
- To practice self-responsibility by being prompt to CDMOD commitments and prepared to focus on your volunteer job responsibilities.

As a Volunteer, you can expect from the Staff of the CDMOD the following:

- To acknowledge you as an individual with valuable, unique abilities.
- To provide initial and on-going skill enhancement training.
- To provide an opportunity to participate through feedback and input.
- To give professional and personal support as well as back-up when needed.
- To evaluate work performance and give feedback.

**I have read and agree to CDMOD's Volunteer Philosophies and Volunteers and Staff policies and procedures:**

\_\_\_\_\_  
**Employee/Volunteer Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**CDMOD Supervisor/Volunteer Coordinator**

\_\_\_\_\_  
**Date**

## **Confidential Information**

Every business has information it considers "proprietary" that must be guarded carefully. The CDMOD is no exception.

There is a variety of information you may handle that seems routine, but may be proprietary and should not leave our offices in a letter, in conversation, or mislaid documents. Technical know-how, future business plans, customer lists, financial information, personal information about employees, and other information can, if known outside the company or by those without a need to know, cause harm or affect our competitive position.

We expect you treat company proprietary information as a valuable resource. These guidelines can help:

- ❑ Information should be provided to the public by authorized personnel.
- ❑ Important documents should be kept in locked files including but not limited to employee files, payroll information, vendor accounts, and customer lists.
- ❑ No copies of confidential and personal documents should be made or retained by any employee except in the ordinary course of the employee's job duties and solely for official purposes.
- ❑ Work areas should be cleared of any sensitive materials at night or when you leave your work area.
- ❑ Unattended and sensitive material should be locked in file cabinets.
- ❑ Computers are for authorized use only by staff and monitored by staff.

Unauthorized disclosure of confidential information about fellow employees, customer finances, account information, volunteers, etc. or the Children's Discovery Museum of the Desert is a serious matter and could be reason for disciplinary action up to and including dismissal.

**I have read, understand, and agree to abide by the policies herein described.**

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**Employee/Volunteer Signature**

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**Date**

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**CDMOD Supervisor/Volunteer Coordinator**

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**Date**

**Children's Discovery Museum of the Desert  
Employee & Volunteer Emergency Information**

Please keep CDMOD informed each time information changes-  
thank you!

Employee or Volunteer's Name:

\_\_\_\_\_

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

In case of an emergency, please notify:

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

Relationship: \_\_\_\_\_

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

Cell: \_\_\_\_\_

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

2<sup>nd</sup> Emergency Contact:

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

Relationship: \_\_\_\_\_

Telephone Numbers:

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

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

Employee or Volunteer Signature: \_\_\_\_\_