Please complete and return by one of the following methods:

Email: volprog@fi.edu
Fax: 215-448-1314
Mail: The Franklin Institute Volunteer Office
222 North 20th Street
Philadelphia, PA 19103-1194

Name (Dr., Ms., Miss, Mr.)
Address
City, State, Zip

If you are a Pennsylvania resident, please answer the following question:

Have you lived in the state of Pennsylvania for the last 10 years?  
☐ Yes  ☐ No

Home Phone ( )  Cell Phone ( )  Birthdate

Education (circle last)  High School:  9  10  11  12  College:  1  2  3  4  Graduate:  1  2  3  4

Name of High School, College or University:

Occupation  Employer

Work Phone ( )  E-mail Address

Emergency Contact Name  Emergency Phone ( )

Please note that the following opportunities are not always available, as volunteer needs change throughout the year.

Areas of interest at The Franklin Institute (please indicate 1st and 2nd preference):

Educational Program Assistants:  
☐ Camp-In (Fri, Sat)  ☐ Discovery Camp  ☐ Exhibit Facilitator  
☐ Exhibit/Program Development  ☐ PACTS Mentor  ☐ Science Presenter  ☐ Workshops  ☐ Special Events

Office/Research Assistants:  
☐ Administrative Support  ☐ Curatorial  ☐ Library  ☐ Research & Evaluation

Technical Assistants:  
☐ Information Technology  ☐ Operations  ☐ Theaters  ☐ Other: ________________________________

Volunteers must be at least 15 years of age and should be willing to commit to a minimum of 80 hours of service through weekly volunteering. Volunteer shifts are a minimum of 4 hours. Shorter volunteer commitments are available for Special Events. Some departments have more specific requirements to fit their program needs. Museum hours are between 9:00 a.m. and 5:00 p.m. daily. Keeping this in mind, please indicate your availability:

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is this a school required community service or internship project?  ☐ Yes  ☐ No

Please list the requirements, including hours and dates of the project: ____________________________________________________________

Teacher Contact: ____________________________________________ Telephone: ________________________________
Please list job or volunteer experience (places, dates of service, positions held and reasons for leaving- feel free to attach resume):
_____________________________________________________________________________________________________________________________________ 
_____________________________________________________________________________________________________________________________________ 

Please list skills, hobbies, training, or interests that apply (for example: foreign language, computer, public speaking, biology, etc):
_____________________________________________________________________________________________________________________________________ 
_____________________________________________________________________________________________________________________________________ 
_____________________________________________________________________________________________________________________________________ 

Why do you want to volunteer at The Franklin Institute? _____________________________________________________________ 
___________________________________________________________________________________________________________ 
___________________________________________________________________________________________________________ 
How did you hear about volunteering at The Franklin Institute? ________________________________________________________  
___________________________________________________________________________________________________________ 
___________________________________________________________________________________________________________ 

References - Please list two people, not related to you, whom we may contact for references. At least one must be a professional reference. If you are a student and have never worked, feel free to list a teacher or other adult as your professional reference.

1. Name: __________________________ Relationship: __________________________ 
   Email: __________________________ Telephone: __________________________ 

2. Name: __________________________ Relationship: __________________________ 
   Email: __________________________ Telephone: __________________________ 

Have you ever been convicted of a crime, other than minor traffic offenses? □ Yes □ No
If yes, explain (A conviction is not an automatic disqualification.) ________________________________________________________ 
___________________________________________________________________________________________________________ 

The Franklin Institute reserves the right to conduct Child Abuse History Clearances, Criminal Background Checks and FBI Background Checks.

I understand that I am applying for a position as an unpaid volunteer at The Franklin Institute and that submission of this application does not guarantee placement in the volunteer program.

Signature: Date: 

If under 18 years old, signature of parent or guardian: