



VOLUNTEER PROFILE

First and Last Name _____

Address _____ City _____ State _____ Zip _____

Phone Day _____ Evening _____ Cellular _____ Email: _____

Emergency contact person _____ Phone _____ Relationship _____

How long have you lived/worked in our community? _____

How did you learn about the Latino Art Museum? _____

Is your interest in volunteering with the Museum connected with a career goal or service commitment? ____

School Name _____ Internship _____

Employer Assignment _____ Service hours for another organization _____

If yes, please describe: _____

Time availability: List preferred days and times Wed _____ Thursday _____ Friday _____ Sat _____

On-call as needed (List days and times) _____

Meeting availability (Please List and times) _____

Education and Experience: School (s), College (s), professional or occupation _____

Employment and other volunteer experience _____

Planning Volunteer Roles: Filing _____ Research _____ Special Events _____ Publicity _____

Planned Giving _____ Individual Solicitation _____ Computer _____ Classes _____

Installation _____ Mailing _____ Grants _____ Community Relations _____

Physical Labor _____ Advisory Board by Nomination/Election _____ bookkeeping _____ Other _____

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