### **VOLUNTEER SERVICE APPLICATION**



### **Instruction Sheet**

Thank you for your interest in becoming a volunteer at the

Our volunteers play a vital role in the activities at the

They supplement the staff in important ways with special talents and knowledge that might not be otherwise available.

Please note that you must meet the following requirements in order to be qualified as a NARA volunteer: you must be 16 years or older and meet one of the following three requirements: (1) you must be a U.S. citizen; (2) you must be a legal resident alien [possessor of a green card]; or (3) you must be a holder of a type A1 or A2 diplomatic visa. If you do not meet these requirements, we will not be able to accept your volunteer application.

The next step in applying to become a volunteer is to complete the attached form. Your answers to the questions will enable us to see where you might best help our program and what activities would be most fulfilling to you. Many of the questions are self-explanatory. Others might need a little explanation.

Please note that a background check will be necessary, depending on the type of volunteer service you will provide and the kind of access you are granted to our facility. For further information about this step in the application process, please contact the volunteer coordinator at

Please read the Paperwork Reduction Act Burden Statement and the Privacy Act Statement that follow. The Privacy Act Statement explains the circumstances under which this information may be shared with someone other than NARA staff. Be assured that any information you provide will be held in the strictest confidence and divulged to others only in compliance with the Privacy Act and the Freedom of Information Act.

### PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Public burden reporting for this collection of information is estimated to be 25 minutes per response. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (I), 8601 Adelphi Road, College Park, Maryland 20740. DO NOT SEND COMPLETED VOLUNTEER APPLICATION FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE ADDRESS INDICATED ON THE BOTTOM OF THIS FORM.

### PRIVACY ACT STATEMENT

Collection of this information is authorized by 44 U.S.C. 2104 and 44 U.S.C. 2105(d). The information you provide to NARA on this form will be used to determine if you will be accepted as a volunteer. This information may be disclosed to an expert, consultant, agent or contractor of NARA to the extent necessary for them to assist NARA in the performance of its duties or in accordance with any other "routine uses of records" listing in the Privacy Act System of Records NARA 26, "Volunteer Files." Completing this form is voluntary, but failure to provide all of the requested information will result in you not being accepted as a volunteer.

SEND YOUR COMPLETED APPLICATION: Mail

BY FAX:

BY EMAIL



## **VOLUNTEER SERVICE APPLICATION**



**PERSONAL INFORMATION** Please provide a phone number at which we may reach you Monday through Friday, during business hours to follow up on your application. You also may provide an email address for that purpose.

Please check if you have U.S. Citiz  Name Mr. Mrs. Ms.  Date of birth (MM/DD/YY)  Street address, city, state, zip			
Email			
Home phone number			
EDUCATION			
Level Name / Location of Inst		Years Attended	Diploma/GED Yes No
College Undergraduate		Years Attended	Field of Study
Undergraduate			
Graduate			
WORK EXPERIENCE			
(Summarize your last 10 years of emlast 10 years of employment. If you are		•	•
Position	From / to	Employer	•
PREVIOUS VOLUNTEE	R EXPERIENCE	E	
Duties	From / to	Organizat	ion



# **VOLUNTEER SERVICE APPLICATION**



SPECIAL SKILLS. Check all that apply
The information you provide will help us to identify which activities at the will most interest you and where you can make the greatest contribution to our program.

Are you skilled in Genealogical research Teaching Public speaking Customer Service Writing Research Archival work such as holdings maintenance, processing, or des Using the computer for data er word processing, presentation	ntry,			
LANGUAGES. An ability to speak and understand a foreign language most likely will be used to greet and possibly guide foreign visitors. You would not be expected to explain highly technical aspects of the program. Reading and translating duties might involve assisting the staff in reading and responding to foreign language correspondence or in translating documents from the holdings of the				
Foreign language(s) please list  Speak and Unc Fluent / Pro				
Special languages:  American Sign Language  Highly skilled  Some ability  Braille  Some ability				
WHEN ARE YOU AVAILAB	LE			
Days: Monday Tuesday Wednesday Hours:	Thursday Friday Saturday Sunday			
<b>REFERENCES.</b> List two people who are not relatives who know about your ability and knowledge. It is important that you provide the names of two individuals who can be contracted to discuss your qualifications for a volunteer position. They will be informed of the reason for the contact.				
Name	Name			
Street address	Street address			
City, state, zip	City, state, zip			
Telephone	• •			
Signature				

