



**Volunteer Form: Delaware County Historical Society (DCHS)**

Name: \_\_\_\_\_ Preferred Pronouns: \_\_\_\_\_

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

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

Phone: (optional) \_\_\_\_\_

Experience/Skill Set:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever worked in an archive or library? \_\_\_\_ yes \_\_\_\_ no

Do you have a full or part time job? \_\_\_\_ yes \_\_\_\_ no

Are you comfortable lifting between 25-50 lbs.? \_\_\_\_ yes \_\_\_\_ no

Are you a student? \_\_\_\_ yes \_\_\_\_ no (if yes please list education experience below)

Education: (please tell us about your highest education experience)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to volunteer with DCHS?

\_\_\_\_\_  
\_\_\_\_\_

Have you submitted a resume/CV? \_\_\_\_ yes \_\_\_\_ no

What days are you free? \_\_\_\_ Mon \_\_\_\_ Tues \_\_\_\_ Wed \_\_\_\_ Thurs \_\_\_\_ Fri

Time? \_\_\_\_ AM (9-12) \_\_\_\_ PM (12-4)