

## Volunteer Application Alexander & Baldwin Sugar Museum

P.O. Box 125, 3957 Hansen Road, Puunene, HI 96784 808-871-8058, Fax 808-871-4321 sugarmus@maui.net, www.sugarmuseum.com

## **APPLICATION**-please print

Name					Da	te		
(Last)								
Current Address			City					
State		Zip	Zip		E-mail			
Home Ph	none (	)		Work ( )		Cell ( )		
Emergen	ncy Cont	act:						
Name			Rel			Phone ( )		
If you are	e under	18, please provide	Age	Date of	Birth			
AVAILA	ABILIT	<b>(:</b> Volunteer shift	s are Monday-F	riday, 10-1 or 1	-4, unless des	cribed otherwise	·.	
Start Date		Enc	End Date		hours per wee	k you are able to v	volunteer	
[		Monday	Tuesday	Wednesday	Thursday	Friday		
	AM							
	PM							
SKILLS/EXPERIENCE/ABILITIES/LANGUAGES  Have you ever applied to be a volunteer or been employed in a museum before?								
Please d	escribe y	our employment e	xperience and ar	ny education or b	ackground you	ı have		

Please describe any M	aui history, sugar industry history, plantation h	istory or any people-rela	ted experience you have
Are you fluent in anoth	ner language? Please list		
Do you have allergies of If so, please describe:	or physical or other disabilities that would invo	lve special placement?:_	
REFERENCES			
List two persons who v	will be happy to give a reference on your behal	f:	
Name	Relationship	Phone (	)
Name	Relationship	Phone (	)
VOLUNTEER PLAC	CEMENT		
	olunteer at the Sugar Museum? Is there anyth in the appropriate volunteer position?	ing you would like to tell	us about yourself that will
Who referred you to u	s?		
What would you like to	o do as a volunteer?		

Please return this application to the Alexander & Baldwin Sugar Museum, PO Box 125, 3957 Hansen Road, Puunene, HI 96784 808-871-8058, Fax 808-871-4321