



**SPRINGFIELD MUSEUMS™**  
ART • HISTORY • SCIENCE • SEUSS IN SPRINGFIELD

## Become a Volunteer or Intern!

Come be a part of The Amazing World of Dr. Seuss Museum at the Springfield Museums. Volunteers and interns are needed to facilitate and maintain gallery activities and engage with visitors. You will also prepare project materials and assist guests with literacy based activities in the Cat's Corner, a drop in activity space on the lower level. As a volunteer/intern, you will become part of a diverse, interdisciplinary museum community. Please fill out this application completely and email to [lsutter@springfieldmuseums.org](mailto:lsutter@springfieldmuseums.org) or mail to: Springfield Museums c/o Laura Sutter, 21 Edwards Street, Springfield MA 01103.

Notice: If accepted, candidates will be asked to submit a CORI (background) check

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

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

Please tell us about your work or volunteer experience:

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In what areas do you have special training or interest?:

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Please indicate your availability. Select all that apply.

Tuesdays    Wednesdays    Thursdays    Fridays    Saturdays    Sundays

Mornings    Evenings

References

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

## Volunteer Agreement

I understand that a Criminal Record (CORI) check will be done on anyone who seeks volunteer opportunities with the Springfield Museums. Furthermore I understand and acknowledge that any assignment of volunteer work is conditional on my CORI check and the offer may be rescinded or I may be dismissed if the Springfield Museums determines that the results of its review of my criminal record are unsuitable.

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application and understand that, in the event I am subsequently volunteering at the Springfield Museums, any misstatement of fact made by me in this application or the selection process shall be cause for dismissal regardless as to when or under what circumstances discovered.

I acknowledge and understand that volunteering at the Springfield Museums will be conditional until I pass a reference and/or security check.

I acknowledge and understand that as a volunteer, I will be required to abide by all rules and regulations of the Springfield Museums.

My signature represents that I have read and fully understand the foregoing and seek volunteer opportunities under these conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_