



# VOLUNTEER APPLICATION

Updated: September 2023

## OMA USE ONLY

Intern

Department \_\_\_\_\_ Date Processed \_\_\_\_\_

Supervisor \_\_\_\_\_ OMA Volunteer Email List

Start Date \_\_\_\_\_ RE Volunteer Profile

End Date \_\_\_\_\_ Confirmation Email Sent

Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Preferred Salutation: Miss / Ms / Mrs / Mr / Dr / None / Other \_\_\_\_\_

Nickname \_\_\_\_\_  Male  Female  Genderqueer / Non-Binary  Prefer not to say

### OPTIONAL

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age Category:  under 18  18-64  65+ Pronouns \_\_\_\_\_

Ethnicity: Are you Hispanic/Latino?  Yes  No

Race (select one):  Black/African American  White  Asian  
 American Indian/Alaskan Native  Native Hawaiian/Pacific Islander

Other: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Volunteer opportunities are typically emailed. May we email you?  Yes  No

Email Address \_\_\_\_\_

Are you a member of the Orlando Museum of Art?  Yes  No

Current Occupation or School if student \_\_\_\_\_

(Select one)  undergraduate  graduate

Are you bilingual?  Yes  No If yes, what language(s) do you speak? \_\_\_\_\_

Volunteer History \_\_\_\_\_

Why do you want to volunteer? \_\_\_\_\_

What are your special strengths, talents or abilities? \_\_\_\_\_

Specific days and times you prefer to volunteer \_\_\_\_\_

**PLEASE CHECK TYPE OF VOLUNTEER WORK YOU ARE INTERESTED IN:**

**SPECIAL EVENTS**

- Community Events
- Festival of Trees
- Reception Check In/Greeters

- PLATFORM
- Art in Bloom
- Membership Table

**DEVELOPMENT / MARKETING**

- Bulk Mailings
- Office Support

**EDUCATION**

- Office Support
- Camp Studio Assistant (Winter, Spring, and Summer)
- Youth & Family Special Events

**MUSEUM SHOP**

- Customer Service Associate

**INTERN**

[Department] \_\_\_\_\_

**VISITOR INFORMATION SERVICES**

- Bag check
- Guest Service Associate

In case of emergency, notify:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Volunteer Signature \_\_\_\_\_

Date \_\_\_\_\_

**ALL APPLICANTS UNDER THE AGE OF 18\* MUST COMPLETE THE INFORMATION BELOW AND INCLUDE PARENT OR LEGAL GUARDIAN'S SIGNATURE.**

*\*Minimum age to volunteer is 16\**

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_

My child, \_\_\_\_\_, has my permission to participate as an Orlando Museum of Art volunteer. I hold harmless and agree not to hold Orlando Museum of Art responsible for any accident or illness involving my child. The agreement shall be construed and regulated under and by the laws of the State of Florida.

Signature \_\_\_\_\_

Date \_\_\_\_\_

# VOLUNTEER CODE OF ETHICS



## General Responsibility

Orlando Museum of Art's volunteers serve the public interest as that interest relates to the OMA. Volunteers consider themselves accountable to the public as well as to the OMA. Each volunteer understands and respects the documents that establish and govern the OMA and acknowledge that their own time and attention must be devoted to the affairs of the OMA in order to properly discharge responsibilities to the public and to the OMA. Access to the OMA and its operations is a privilege. The lack of material compensation for efforts on behalf of the OMA in no way frees the volunteer from adherence to the standards that apply to OMA staff. The volunteer must not work for personal gain, other than fulfillment of school or other required volunteer participation; but, instead must work for the gratification and enrichment inherent in OMA participation. Should the performance or behavior of a volunteer in any fashion be deemed unacceptable, it is the prerogative of the OMA to request that the volunteer relinquish their volunteer status. A volunteer must hold all matters of program function and administration confidential. Volunteers who have access to the OMA's collections, research, staff activities or associated information must respect the confidentiality of their assignments, as well as the significance and integrity of the collections.

## Conflict of Interest

Although the OMA may accord special privileges, volunteers shall not accept gifts, favors, loans, other dispensation, or things of value that are offered to them from other parties in connection with carrying out volunteer assignments for the OMA, unless presented by the OMA.

Volunteers should not compete with the OMA for art objects, take personal advantage of information available because of their volunteer status or acquire objects from the OMA unless items are offered in the public marketplace.

Volunteers should not use the OMA's property for anything other than use that is authorized by the OMA. Volunteers may not use the OMA's mailing equipment or supplies for personal use.

Volunteers may not remove an article from the OMA's permanent collection for use in a private manner in their home or elsewhere for personal enjoyment, decoration or prestige, etc.

Volunteers may not represent the OMA as taking a side or position with respect to an issue or cause unless the OMA's Board of Trustees has previously adopted that position.

Should a conflict develop between the needs and desires of the volunteer and those of the OMA, the OMA will prevail.

# VOLUNTEER AGREEMENT



## A Volunteer Agrees To:

- Consider volunteer work a serious professional commitment and view the position as valid and important.
- Represent the OMA in an appropriate and responsible manner at all times.
- Be aware of and abide by the OMA's Volunteer Code of Ethics.
- Attend orientation and training sessions as scheduled and undertake continuing education when provided to maintain and enhance competence in assigned tasks.
- Act as a member of the OMA team when working with other volunteers and the OMA staff.
- Follow the position description and accept supervision.
- Be prompt and reliable in reporting for work and follow through on all commitments.
- Notify the appropriate staff member or the Volunteer Department as soon as possible if unable to work scheduled shift(s) due to illness or an unexpected reason 407.896.4231 x229.
- Be consistent about signing in and out to maintain accurate hours.
- Dress in an appropriate manner for the position assigned.
- Communicate with the Volunteer Department or appropriate OMA staff to resolve any problems.
- Immediately report all injuries or illnesses, no matter how minor, to your supervisor. In case of injury or seizure, call Security. Do not move the patient but clear the area of spectators and materials that may injure the patient. In all situations, avoid contact with blood, vomit and body fluids.
- Hold harmless and agrees not to hold Orlando Museum of Art responsible for any accident or illness.
- Provide the Volunteer Department with adequate notice before terminating his/her position.
- That they have no felony or misdemeanor convictions on their record.
- The OMA is implementing new health and safety guidelines such as a mask requirement, increased sanitation procedures and enforcing social distancing to ensure the well-being of its visitors. However, enrolling in the volunteer program could increase the risk of the volunteer becoming infected with COVID-19. The volunteer understands the risks associated with enrolling in the volunteer program and agrees to assume the risks to themselves and their households. The volunteer also agrees to abide by the safety guidelines set by OMA. If the volunteer shows symptoms of COVID-19 such as a temperature of 100.4°F or higher, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, or new loss of taste or smell, they must notify OMA as soon as possible, and local health officials and staff will immediately be notified while maintaining confidentiality as required by the Americans with Disabilities Act (ADA) and other applicable federal and state privacy laws.
- Please be aware that by volunteering for the Orlando Museum of Art, you consent to your voice, name, and/or likeness being used, without compensation, in print or film for use in any and all media and advertising, whether now known or hereafter devised, and you release the Orlando Museum of Art, its successors, assigns and licensees from any liability whatsoever of any nature.

I, \_\_\_\_\_ (*print*), have read and will abide by the Orlando Museum of Art's Volunteering Code of Ethics. The agreement shall be construed and regulated under and by the laws of the State of Florida.

Sign \_\_\_\_\_ Date \_\_\_\_\_

**THANK YOU FOR VOLUNTEERING AT THE ORLANDO MUSEUM OF ART!**

# VOLUNTEER ADDENDUM

Updated: August 2020



## The following has been added to the original Volunteer Form you signed previously:

The OMA is implementing new health and safety guidelines such as a mask requirement, increased sanitation procedures and enforcing social distancing to ensure the well-being of its visitors. The volunteer agrees to abide by the safety guidelines set by OMA.

However, enrolling in the volunteer program could increase the risk of the volunteer becoming infected with COVID-19. The volunteer understands the risks associated with enrolling in the volunteer program and agrees to assume the risks to themselves and their households.

If the volunteer shows symptoms of COVID-19 such as a temperature of 100.4°F or higher, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, or new loss of taste or smell, they must notify OMA as soon as possible, and local health officials and staff will immediately be notified while maintaining confidentiality as required by the Americans with Disabilities Act (ADA) and other applicable federal and state privacy laws.

## A Volunteer Agrees To:

I, \_\_\_\_\_ (*print*), have read and will abide by the Orlando Museum of Art's Volunteering Code of Ethics. The agreement shall be construed and regulated under and by the laws of the State of Florida.

Sign \_\_\_\_\_ Date \_\_\_\_\_

**THANK YOU FOR VOLUNTEERING AT THE ORLANDO MUSEUM OF ART!**