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# Volunteer Expression of Interest

## Personal Details

**Surname** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Title . . . . . . . . . . . . . . . . . . . . . .

**Given Names** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**Address** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**Suburb** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Postcode . . . . . . . . . . . . . . . . . . .

**Telephone:** Home . . . . . . . . . . . . . . . . . . . . . . . . . . Mobile . . . . . . . . . . . . . . . . . . . . . . . . . . .

**Email:** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**Member of RHSV**: Yes [ ]  No [ ]

**Member of affiliated society** Yes [ ]  No [ ]

**Age**: Under 20 [ ]  20 -29 [ ]  30 – 39 [ ]  40 -49 [ ]  50 – 59 [ ]  60 – 69 [ ]  70 – 79 [ ]  80 + [ ]

**Gender**: Male [ ]  Female: [ ]  Other: [ ]

Are you a student? Work experience: [ ]  or Student volunteer: [ ]

School / tertiary institution . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

## Skills and interests

Provide a short statement on why you want to volunteer at the RHSV:

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## Areas of interest:

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  Research | [ ]  Administration | [ ]  Publications | [ ]  Fundraising / grants |
| [ ]  Library work  | [ ]  Public Events  | [ ]  Exhibitions | [ ]  Data entry  |
| [ ]  Conservation | [ ]  Marketing | [ ]  Wordpress | [ ]  CRM databases |
| [ ]  Cataloguing | [ ]  Graphic design | [ ]  Social media | [ ]  App Development |
|  | [ ]  Sponsorship |  |  |

**Other (please specify)** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**Qualifications / relevant experience** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

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## Preferred days

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| Morning |  |  |  |  |  |
| Afternoon |  |  |  |  |  |

Frequency Daily[ ]  Weekly[ ]  Fortnightly[ ]  Specific Events / Campaigns[ ]

**Preferred working location**: onsite [ ]  off-site [ ]

**Date available to start**: \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_

**Health**

Do you know of any injuries, diseases, conditions or complaints which would restrict your ability to work as a volunteer? If yes, please provide details . . . . . . . . . . . . . . . . . . . . . . . .

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Please specify any additional information or special circumstances that may have a bearing on your application (ie length of commitment, transport difficulties, etc)

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*Please return your completed form to the Volunteer Coordinator
collections@historyvictoria.org.au or to the address below.*

**Office Use Only :** Code of Conduct [ ] , Working with Children Check [ ] , Zoho record [ ]