

TEXAS HOLOCAUST AND GENOCIDE COMMISSION

P.O. Box 12276 • Austin, Texas 78711-2276

512-463-5674 Office • 512-936-0684 Fax

PETER E. TARLOW, CHAIRMAN

Volunteer Application

Please print clearly.

Date: _____

Applicant Information

Name: _____

Phone: _____

Email: _____

Physical Address: _____

Mailing Address (if different): _____

References (Please do not include relatives)

Reference 1:

Name: _____

Phone: _____

Email: _____

Relationship: _____

Reference 2:

Name: _____

Phone: _____

Email: _____

Relationship: _____

Please tell us about yourself:

VOLUNTEER: Are you currently or have you previously been a volunteer for another organization? If yes, please describe:

EDUCATION: List school(s), degree(s), and major field(s) of study

School: _____

Degree/Diploma: _____

Major: _____

FOREIGN LANGUAGE SKILLS:

Language: _____ Fluency: _____
Basic Intermediate Advanced

SKILLS: Please check all that apply.

_____	Speaking/Lecturing	_____	Website design
_____	Filing	_____	Photography
_____	Graphics/design	_____	Research
_____	Data entry	_____	Editing/proofreading
_____	Word processing	_____	Other - please describe:
_____	Writing	_____	
_____	Customer Service		

INTERESTS:

What type of volunteer work interests you most?

_____	Speaker/Presenter	_____	Special Events/Memorials and Exhibits
_____	Education/Resources	_____	Other - please describe:
_____	Administrative	_____	
_____	Underwriting		

How did you learn about the THGC's Volunteer Program?

_____ THGC website
_____ Museum website
_____ Media (i.e.: newspaper, magazine, etc.)
_____ Texas Historical Commission website
_____ Other - please describe: _____

Signature: _____

Please return this form by mail, fax, or scanned email attachment to:

Texas Holocaust and Genocide Commission
P.O. Box 12276
Austin, TX 78711-2276
Tel: (512) 463-5674
Fax: (512) 936-0684
cheyanne.perkins@thgc.texas.gov

Thank you for your interest in volunteering.