



## Appalachian Artisan Center Volunteer Application

Thank you very much for applying to volunteer with us at the Appalachian Artisan Center. Your volunteer hours are valuable to us and we are so grateful to have you donate your services for our center. Please fill out the information below.

### Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

### Court Ordered?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, how many hours: \_\_\_\_\_ Duration: \_\_\_\_\_

### Availability & Hours

Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_ Saturday \_\_\_

### Interests

Please tell us which areas you are interested in volunteering (Mark all that apply)

Front Desk (customer service, COVID safety measures)

Landscaping

Office Work (filing, organizing)

Maintenance (electrical, carpentry)

Gallery Assist (Hanging work, taking down shows)

Cleaning

Fundraising

Classroom/Studio Assist

Phone Bank

Store Assist

Other \_\_\_\_\_

**Special Skills or Qualifications**

Please summarize special skills, training and qualifications you have acquired from employment previous volunteer work, or through other activities, including hobbies or sports  
Previous Volunteer Experience

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Please summarize your previous volunteer experience.

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Please tell us why are you interested in volunteering at the Appalachian Artisan Center and how did you hear about us?

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Anything else we should know about you?

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Please return this form to:

AAC PO Box 833 Hindman, KY or [lisa.burke@artisancenter.net](mailto:lisa.burke@artisancenter.net)