



DOCENT APPLICATION

If you have not done so already, please also complete and submit our Volunteer Application with this application.

Name: _____ E-Mail _____

Address: _____

City/State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

If you are fluent in any languages other than English, would you be comfortable conducting non-English tours? N/A No Yes If yes, what language(s):

Please check your tour age-group and special needs group preferences. Feel free to check as many as are applicable:

- Preschool
- Grades K-2
- Grades 3-6
- Junior High
- High School
- Adult
- Senior Citizens
- Physically Handicapped
- Blind Visitors
- Mentally Handicapped
- Non-English Speaking
- Deaf Visitors
- At Risk (particularly, troubled teens)
- Art and/or Art History Students
- Participate in teaching art activities/assist Art Instructor staff member
- Other

If you did not already do so on the Volunteer Application, please describe any personal, professional and/or educational experiences which will enhance/complement your docent experience:

Please list any additional skills and talents which you would be willing to share with us:

What do you want out of the docent experience?

The Docent Program at the Fresno Art Museum is just being reformed and there were be jobs to help organize, write policy, recruit, scheduling and phone calling. Are you willing to commit time to other docent-related activities in addition to training and conducting tours?

No Yes Maybe _____

Do you have an interest in serving on the Docent Council Board? No Yes If yes, have you previously served on non-profit boards? No Yes If yes, in what capacity?

Preferred Tour Day/Time: _____

Alternate Day(s) Available/Time: _____