



Children's Museum
of Atlanta

TEEN MVP APPLICATION

SUMMER & FALL 2020



SEND THIS APPLICATION



ATTN: Volunteer Coordinator
Children's Museum of Atlanta
275 Centennial Olympic Park Dr. NW
Atlanta, GA 30313



Volunteer Coordinator
volunteers@childrensmuseumatlanta.org

SUMMER DEADLINE: JUNE 30, 2020 | FALL DEADLINE: OCTOBER 31, 2020

ABOUT THE PROGRAM

Teen MVPs work with Museum professionals and other volunteers to help Children's Museum of Atlanta to fulfill its mission. Each day, Teen MVPs help lead classes, get a chance to play with kids on the Museum floor, learn how to develop curriculum for informal learning, and help with a variety of other roles within the building.

OUR MISSION IS TO CHANGE THE WORLD BY SPARKING EVERY CHILD'S IMAGINATION, SENSE OF DISCOVERY AND LEARNING THROUGH THE POWER OF PLAY.

In this program, we hope each Teen MVP has a fun and meaningful experience while developing life, leadership, and career-readiness skills, and a sense of lifetime learning and service.

Expectations & Responsibilities:

- Must at least 14 years old to participate.
- Must be enrolled in school (if you have already graduated high school, ask us how you can join our adult volunteer team)
- Desire to work with children, aged 0-8
- Assist with and facilitate Museum programs and activities
- Assist in the upkeep of the Museum floor and exhibits
- Provide assistance and information to guests

Time Commitment:

- Attend an orientation session at the beginning of the term
- Serve at least 40 hours during the summer or 20 hours during a school semester
- Attend additional trainings when scheduled



Please Print

Date _____

Name _____ Birthdate ____/____/____

(Please note, participants must be at least 14.)

Address _____

City, State & Zip _____

Email _____ Phone _____

May we text you with updates and information about your volunteer shifts? ☐ Yes

☐ No

School _____ Grade Level (2020/2021) _____

First Day of School ____/____/____

Parent/Guardian _____

E-Mail _____ Phone _____

Parent/Guardian #2 (optional) _____

E-Mail _____ Phone _____

Have you volunteered with us before? ☐ Yes ☐ No

If yes, in what year and capacity? _____

How did you hear about our volunteer program?

☐ CMA Website ☐ Museum Visit ☐ School ☐ Work ☐ Friend/Family

☐ Other (Please specify) _____





List your previous volunteer experiences, if any.

List any extracurricular activities in which you are involved or any interests you have:

Why do you want to be a part of the Children's Museum of Atlanta teen volunteer program?

ASSIGNMENTS & AVAILABILITY

ASSIGNMENTS

Place a check mark next to any of these areas you would be interested in doing:

- | | | |
|---|---|---|
| <input type="checkbox"/> Art Studio | <input type="checkbox"/> Build It Lab (Maker space) | <input type="checkbox"/> Science Bar |
| <input type="checkbox"/> Drama/Storytelling | <input type="checkbox"/> Toddler Programs | <input type="checkbox"/> Field Trips |
| <input type="checkbox"/> Social Media/Marketing | <input type="checkbox"/> Memberships | <input type="checkbox"/> Administrative |

These areas may change before the summer begins. Our hope is you try a few different areas early in the Summer before we make assignments official.

AVAILABILITY

During the summer, the Museum is open daily between 10 AM and 5 PM.

Place a check mark next to any days you will be available:

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Monday AM | <input type="checkbox"/> Monday PM |
| <input type="checkbox"/> Tuesday AM | <input type="checkbox"/> Tuesday PM |
| <input type="checkbox"/> Wednesday AM | <input type="checkbox"/> Wednesday PM |
| <input type="checkbox"/> Thursday AM | <input type="checkbox"/> Thursday PM |
| <input type="checkbox"/> Friday AM | <input type="checkbox"/> Friday PM |
| <input type="checkbox"/> Saturday AM | <input type="checkbox"/> Saturday PM |
| <input type="checkbox"/> Sunday AM | <input type="checkbox"/> Sunday PM |

We will accept applications on a rolling basis as long as space is available.

We will review each application as they come in and notify you if you are accepted or not within a week of submission.

Application must be submitted along with TWO (2) letters of recommendation. These letters may be written by teachers, school officials, coaches, volunteer or work supervisors, or community leaders. Applications are not considered complete until we receive these letters.

If accepted into program, volunteers are expected to attend an orientation before his or her first week. We will contact you with dates and times for orientation.

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STUDENT AND PARENT AGREEMENT

Student and Parent Agreement

I, _____, agree to commit to participate in this program and serve at least 60 hours from June 1 through September 1, 2019. I agree to attend orientation in May and other trainings when schedule and arrive on time for my shifts, except in unforeseen circumstances. I also agree to follow the rules and procedures of Children's Museum of Atlanta and to follow all instructions from my supervisors. I understand that if I fail to meet these requirements, I may not be eligible for continued involvement with the program.

Signature of Student

Date

As a parent or guardian, I understand that my child needs my consent and involvement to be a productive participant. I will do my best to ensure that my child meets all the requirements of the position including regular attendance and adherence to Museum policies and procedures. I give permission for my child to participate in all program-sponsored activities including program orientations, small group discussions, and social outings.

Signature of Parent

Date

Office Use Only

Date Received: _____

LoR#1 _____ LoR#2 _____

Notified Applicant _____

