

Volunteer Application

Please return application and resumé to info@cfafoundation.org



Thank you for your interest in volunteering at the Center for Architecture. The Center for Architecture promotes public awareness and a broader appreciation of the impact of architecture, design, and planning in the built environment, principally through educational programs, activities, and scholarship.

Name	
Street Address	
City, State, Zip	
Email Address	
Day time phone	
Evening phone	

Availability

During which hours are you available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Are there specific dates you are available? _____

Interests

Tell us which areas you are interested in volunteering! Please check all that apply.

- FamilyDay@theCenter: Weekend public programs for children ages 5-13 and their parents
Volunteer commitment: 3+ hours on Saturdays once or twice a month
- Studio@theCenter: 3 - day thematic programs for children ages 5-18
Volunteer time commitment: 3 full days, T - TH. 8:30am-4:30pm
- Summer@theCenter: Week-long thematic programs for children ages 5-18
Volunteer time commitment: at least one full week, M - F. 8:30am-4:30pm
- Reviewers for Urban Assembly School of Design & Construction final semester projects
Volunteer time commitment: 2+ hours various times in January and May
Volunteer requirement: Practicing architects and architectural students

Please attach your resumé, including relevant skills, qualifications, and past volunteer experience. If you do not have a resume, please fill out the sections below.

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or other activities, including hobbies.

Previous Volunteer Experience

Tell us about other places you have volunteered and what projects or tasks you worked on.

Person to notify in case of emergency

Name	
Street Address	
City, State, Zip	
Email Address	
Day time phone	
Evening phone	

Agreement and Signature

I understand by submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name	
Signature (or initial if completing digitally)	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability

Thank you for completing this application and for your interest in becoming a CFA volunteer.

Please send this form and your resumé to info@cfafoundation.org.