



## EAA VOLUNTEER APPLICATION

Date: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current or most recent Employer \_\_\_\_\_

Position \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Ph \_\_\_\_\_

Are you an EAA Member?  Yes  No If yes, # \_\_\_\_\_

Please check one:  Under 18 years of age  At least 18 years of age

Birth Month/Day (please do not include year): \_\_\_\_\_

1. Areas of Volunteer Interest (check all that apply):

<input type="checkbox"/> Office Assistance	<input type="checkbox"/> Grounds/Facilities	<input type="checkbox"/> Museum Docent	<input type="checkbox"/> Special Events
<input type="checkbox"/> Week of AirVenture	<input type="checkbox"/> Prior to AirVenture and during	<input type="checkbox"/> Summer	<input type="checkbox"/> Year-round
<input type="checkbox"/> Marketing	<input type="checkbox"/> Business Development	<input type="checkbox"/> Government Advocacy	<input type="checkbox"/> Retail
<input type="checkbox"/> Membership Services	<input type="checkbox"/> Publications	<input type="checkbox"/> Security	<input type="checkbox"/> Print/Mail Dept.

Other (please specify) \_\_\_\_\_

2. How many hours a week are you available for volunteering?

\_\_\_\_\_

3. When are you available?

Mornings  Afternoons  Evenings  As Needed

Other \_\_\_\_\_

4. What day(s) are you available?

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

5. What skills, training or knowledge do you wish to utilize at EAA?

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6. Have you ever been convicted of a felony or misdemeanor crime?  Yes  No

If Yes, please explain (you will not be denied a volunteer opportunity solely based on conviction record, unless it is substantially related to the opportunity you are applying for/interested in):

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7. How did you learn about EAA and our volunteer opportunities?

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8. What interested you in becoming a volunteer for EAA?

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Please provide two personal or professional references:

Name	Phone	Relationship
1.		
2.		

I hereby attest that the above information is factual to the best of my knowledge and understand that if offered a volunteer opportunity, falsified statements on the application may result in dismissal from my volunteer position.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***THANK YOU FOR YOUR INTEREST IN BECOMING AN EAA VOLUNTEER!  
AT EAA, VOLUNTEERS MAKE A DIFFERENCE!***

Please return completed application via email to:

[HR@eaa.org](mailto:HR@eaa.org)

Or Mail to:

EAA Aviation Center, Attn: Human Resources, PO Box 3086, Oshkosh, WI 54903-3086