

**“We are forever indebted to those who paid the supreme price of slavery”**



## **African Scientific Research Institute**

**On the campus of the University of Illinois at Chicago-C/o IRRPP (MC 347)  
412 South Peoria Street, Suite B11  
Chicago, Illinois 60607**

### **Volunteer Information**

If you are interested in volunteering at the African Scientific Research Institute, please complete the following volunteer application. If there is a good match between your interests and the INSTITUTE and Museum's needs, the Manager of Volunteer Services will call you to schedule an interview. If you have any questions please contact the Volunteer Department:

Telephone: (312) 355-4309 or 3229  
FAX: 312-413-2091  
E-mail: [asri@uicalumni.org](mailto:asri@uicalumni.org)

The Volunteer Department is open from 9:00 AM \_\_\_\_\_ to 5:00 PM \_\_\_\_\_  
Tuesday through Friday and alternating Mondays. (future information)

#### **Requirements**

No science background or experience is required for most opportunities. All you need is an inquisitive mind, enthusiasm, and a desire to get involved. There are lots of options -- come explore behind the scenes! (Volunteers must be at least 15 years old.)

#### **Application Form**

Please fill out the following application form

Please note: all prospective volunteers must request and fill out their **own** application. We look forward to receiving your application and thank you for considering the African Scientific Research Institute!

# Volunteer Application Form

Name \_\_\_\_\_  
First \_\_\_\_\_  
Initial \_\_\_\_\_  
Last \_\_\_\_\_  
Preferred nickname \_\_\_\_\_

## **Contact Information**

Home Phone (    ) \_\_\_\_\_ - \_\_\_\_\_

Business Phone (    ) \_\_\_\_\_ - \_\_\_\_\_

I prefer to receive calls at Home    Business    Any Phone

E-mail address \_\_\_\_\_

Street Address \_\_\_\_\_

Apartment number \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Country (If other than the United States)

Zip or Postal Code

## **General Information**

Why would you like to become an ASRI volunteer?

How did you find out about our volunteer program?

What volunteer positions are you interested in?

Have you ever volunteered with us before? No \_\_\_ Yes \_\_\_

(If yes, in what year(s)?)

Is anyone else at this address already a volunteer with us? No \_\_\_ Yes \_\_\_

(If yes, what is the person's name?)

## **Personal Information**

Age (optional) please notes: Volunteers must be at least 15.

Birth date (optional) MM/DD \_\_\_\_\_

Education \_\_\_\_\_

Describe your education from high school up:

Tell us about your special skills or interests:

### **Employment Information**

I am (please check one): Employed\_\_\_ Unemployed\_\_\_ Retired\_\_\_ Student

My employer offers a time-off program for volunteers.

My employer offers a donation-matching program.

### **References**

Please list one person other than a relative who would be willing to serve as a personal Reference.

First \_\_\_\_\_

Last \_\_\_\_\_

Relationship \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

### **Availability**

Time you have available for work here: Hours per week

Weekdays: Yes No | Evenings: Yes No |

Weekends: Yes No

#### **Notes about your availability**

Are you available for special events scheduled in the evenings?

Yes\_\_\_ No\_\_\_