



2008-2009 Docent Program Application

CHECK ONE: DAYTIME PROGRAM EVENING/WEEKEND PROGRAM
 DOCENT PARTNER PROGRAM (DAYTIME)

Name _____ Today's Date _____

Address _____ Apt. # _____

City/State/Zip _____

Home Phone _____ Work Phone _____

e-mail _____ I plan to be in the Montgomery area _____ year(s).

How did you learn about the Docent Program? _____

Why do you wish to become a Docent? _____

Are you presently involved in volunteer work or have you been in the past? _____

If so, what? _____

• Daytime Docent Program

Docents-in-training will attend 22 training sessions, some additional hours reading and doing research, and time observing/assisting experienced docents. In addition, we ask New Daytime Docents to give 25 hours of service to the Museum during the year (May - April).

• Evening/Weekend Docent Program

Docents-in-training will attend 9 training sessions, some additional hours reading and doing research, and time observing/assisting experienced docents. In addition, we ask New Evening/Weekend Docents to give 12 hours of service to the Museum during the year (May - April).

• Docent Partner Program (Daytime)

Docent Partners attend training sessions as necessary or desired. Docent Partners provide service hours in the areas of their choice.

Can you make this commitment? _____

Signature

• AVAILABILITY: check all that apply (if availability changes, please notify the tour coordinator)

WEEKDAY: [] Tues [] Wed [] Thurs [] Fri

WEEKEND/EVENING: [] Thurs PM [] Sat [] Sun

(for background information only, will not affect acceptance into the Docent Program)

Education: College _____ Degree(s) _____

Other _____ Major _____ Minor _____

Professional Work Experience of any kind: _____

Have you ever done any public speaking? _____ If so, what? _____

Art Background: Undergraduate _____ Graduate _____

Other _____

Do you have an interest in or experience with specific art forms?

(sculpture, painting, textiles, decorative arts, etc.)

Describe: _____

Languages other than English _____

Organizations in which you are active: _____

Special Interests or Hobbies _____

Please return this application to:

**Docent Program
Montgomery Museum of Fine Arts
PO Box 230819
Montgomery, AL 36123-0819**