



# DELAWARE DIVISION OF HISTORICAL & CULTURAL AFFAIRS INDIVIDUAL VOLUNTEER APPLICATION

PHONE: (302) 736-7411 | FAX: (302) 739-5660 | HCA\_VolunteerSvc@state.de.us  
<http://history.delaware.gov>

NAME : \_\_\_\_\_

ADDRESS (STREET, CITY, STATE & ZIP CODE): \_\_\_\_\_

PHONE (PRIMARY): (\_\_\_\_) \_\_\_\_\_ OTHER: (\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

TIME COMMITMENT:  SHORT TERM  ONGOING PARTNERSHIP  SPECIFIC DATE(S): \_\_\_\_\_

PLEASE INDICATE DAYS & TIMES OF AVAILIBLTY IN THE TABLE BELOW:

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

LOCATION PREFERENCE:  NEW CASTLE  KENT  SUSSEX  SPECIFIC HCA SITE: \_\_\_\_\_

WHAT TYPE OF VOLUNTEER WORK ARE YOU INTERESTED IN? (SOME WORK MAY BE SITE & TIME SPECIFIC)

- HISTORIC SITE DOCENT  GARDENING/LANDSCAPING  MAINTENANCE/BUILDING TRADES  ARCHAEOLOGICAL LAB/FIELD WORK  
 RESEARCH  ADMINISTRATIVE SUPPORT  COLLECTIONS ASSISTANCE  PHOTOGRAPHY  DATA ENTRY  SPECIAL EVENTS

WHY ARE YOU INTERESTED IN VOLUNTEERING WITH HCA? \_\_\_\_\_

HOW DID YOU HEAR ABOUT US? \_\_\_\_\_

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR THREE (3) PERSONAL, WORK AND/OR VOLUNTEER REFERENCES:

AGENCY NAME & LOCATION	VOLUNTEER POSITION	DATES	CONTACT NAME	PHONE NUMBER

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR CLASS A MISDEMEANOR?  NO  YES

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

PLEASE PROVIDE CONTACT INFORMATION FOR TWO (2) INDIVIDUALS TO BE NOTIFIED IN CASE OF AN EMERGENCY:

---

NAME	RELATIONSHIP	PHONE NUMBER
------	--------------	--------------

---

---

NAME	RELATIONSHIP	PHONE NUMBER
------	--------------	--------------

---

**DIVISION OF HISTORICAL & CULTURAL AFFAIRS INDIVIDUAL VOLUNTEER POLICY:**

*(PLEASE MAKE SURE TO READ, UNDERSTAND, AND AGREE TO THE FOLLOWING BEFORE SIGNING)*

- VOLUNTEERS PERFORM SERVICE WITHOUT COMPENSATION AND ARE NOT CONSIDERED EMPLOYEES OF THE STATE OF DELAWARE. THE DIVISION OF HISTORICAL AND CULTURAL AFFAIRS (HENCEFORTH REFERRED TO AS HCA) DOES NOT PROVIDE WORKER'S COMPENSATION OR ANY OTHER INSURANCE COVERAGE FOR VOLUNTEERS. AS A VOLUNTEER I WILL NOT ATTEMPT WORK THAT IS BEYOND MY ABILITIES OR FOR WHICH I HAVE NOT BEEN ASSIGNED, TRAINED, OR AUTHORIZED.
- I UNDERSTAND THAT PHOTOGRAPHS MAY BE TAKEN AT SPECIAL EVENTS, AND THESE PHOTOGRAPHS MAY BE UTILIZED IN FUTURE PUBLICATIONS, PROMOTIONAL MATERIALS, AND EXHIBITS.
- HCA CANNOT GUARANTEE VOLUNTEER PLACEMENT. HCA WILL, HOWEVER, MAKE EVERY EFFORT TO MATCH VOLUNTEER APPLICANTS TO VOLUNTEER OPPORTUNITIES BASED ON THE NEEDS OF THE DIVISION AND THE INTERESTS AND ABILITIES OF THE VOLUNTEER.
- HCA EMPLOYS A SCREENING PROCESS FOR ALL VOLUNTEERS BASED ON THE NATURE OF THE VOLUNTEER WORK AND INVOLVEMENT LEVEL OF THE PARTICIPANT.
- ACCEPTANCE AS A VOLUNTEER IS CONTINGENT UPON SUCCESSFUL COMPLETION AT ALL LEVELS OF SCREENING.
- BY SIGNING THIS APPLICATION, I HEREBY AUTHORIZE HCA TO CONDUCT A REFERENCE CHECK FROM THE THREE (3) REFERENCES LISTED ABOVE, IN CONNECTION WITH MY APPLICATION AS A VOLUNTEER WITHIN THIS DIVISION.
- HCA RESERVES THE RIGHT TO REJECT A CANDIDATE FOR ANY REASON WHICH HCA, IN ITS SOLE JUDGMENT, DETERMINES MAY AFFECT THE BEST INTERESTS OF HCA. HCA RESERVES THE RIGHT TO WITHHOLD THE REASON(S) FOR SUCH REFUSAL.
- HCA ACCEPTS THE SERVICE OF ALL VOLUNTEERS WITH THE UNDERSTANDING THAT SUCH SERVICE IS AT THE SOLE DISCRETION OF HCA. VOLUNTEERS AGREE THAT HCA MAY AT ANY TIME, FOR ANY REASON, DECIDE TO TERMINATE THE VOLUNTEER'S RELATIONSHIP WITH HCA OR TO MAKE CHANGES IN THE NATURE OF THE VOLUNTEER ASSIGNMENT.
- A VOLUNTEER AGREEMENT FORM DEFINING THE VOLUNTEER'S PROJECT(S) AND COMMITMENT(S) MUST BE SIGNED BY THE VOLUNTEER AND SUBMITTED TO THE DIVISION'S VOLUNTEER SERVICES OFFICE PRIOR TO THE ONSET OF SERVICE.
- THE VOLUNTEER MAY AT ANY TIME, FOR ANY REASON, DECIDE TO SEVER THE RELATIONSHIP WITH HCA. NOTICE OF SUCH DECISION NEEDS TO BE COMMUNICATED AS SOON AS POSSIBLE TO THE DIVISION'S VOLUNTEER SERVICES COORDINATOR(S).
- ANY VOLUNTEER SIXTEEN (16) YEARS OF AGE AND UNDER, MUST BE ACCOMPANIED BY A PARENT OR LEGAL GUARDIAN FOR THE FULL DURATION OF THE VOLUNTEER PROJECT.

---

SIGNATURE OF APPLICANT

DATE

**REQUIRED IF UNDER THE AGE OF EIGHTEEN (18):**

I CERTIFY THAT I, \_\_\_\_\_ AM THE PARENT OR LEGAL GUARDIAN OF \_\_\_\_\_, WHO WISHES TO VOLUNTEER, WITHOUT COMPENSATION, WITH HCA. HE/SHE HAS MY PERMISSION TO BE ASSIGNED AND PARTICIPATE AS A VOLUNTEER WITH THIS DIVISION. I UNDERSTAND THE RISKS INVOLVED WITH BEING A VOLUNTEER, AND I ACKNOWLEDGE THAT THE STATE OF DELAWARE, INCLUDING ALL DEPARTMENTS, DIVISIONS, AND STATE EMPLOYEES, WILL NOT ASSUME FINANCIAL LIABILITY FOR INJURY AND/OR ILLNESS THAT MIGHT OCCUR DURING AND/OR AS A RESULT FROM VOLUNTEERING WITH HCA. I FURTHER UNDERSTAND THAT IT IS HCA POLICY FOR A PARENT OR LEGAL GUARDIAN TO ACCOMPANY ANY INDIVIDUAL SIXTEEN (16) YEARS OF AGE AND UNDER FOR THE DURATION OF THE VOLUNTEER PROJECT.

---

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

**PLEASE RETURN COMPLETED APPLICATION TO:**

DIVISION OF HISTORICAL & CULTURAL AFFAIRS  
ATTN: VOLUNTEER SERVICES COORDINATOR  
21 THE GREEN  
DOVER, DE 19901  
OR  
HCA\_VolunteerSvc@state.de.us  
OR  
FAX: (302) 739-5660

**ACKNOWLEDGMENT OF SUPPORT**

This publication has been financed in part with federal funds from the National Park Service, Department of the Interior. However, the contents and opinions do not necessarily reflect the views and policies of the Department of the Interior.

**NONDISCRIMINATION STATEMENT**

This program receives Federal financial assistance for identification and protection of historic properties. Under Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, as amended, the U.S. Department of the Interior prohibits discrimination on the basis of race, color, national origin, disability or age in its federally assisted programs. If you believe you have been discriminated against in any program, activity, or facility as described above, or if you desire further information, please write to: Office of Equal Opportunity, National Park Service, 1849 C Street, N.W., Washington, DC 20240.

WE THANK YOU FOR CHOOSING DELAWARE'S DIVISION OF HISTORICAL & CULTURAL AFFAIRS!