



The Ferguson House  
PO Box 94913, 700 South 16<sup>th</sup> Street  
Lincoln, NE 68509-4913  
allison.laduke@nebraska.gov  
402-471-5417

## VOLUNTEER DOCENT APPLICATION

Thank you for your interest in volunteering with the historic Ferguson House.  
Please take a moment to complete this application form.  
You must be 21 years old to be a volunteer docent.

### BACKGROUND INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Employment Experience: \_\_\_\_\_

Volunteer Experience: \_\_\_\_\_

Is verification of your volunteer hours required? \_\_\_\_\_

If yes, what organization and why? \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a violation of law, other than a minor traffic violation? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

(A conviction will not necessarily disqualify you from volunteering.)

Emergency Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

INTERESTS AND AVAILABILITY

Special Skills or Hobbies: \_\_\_\_\_

What would you like to gain by volunteering? \_\_\_\_\_

Please indicate the days and times you are available to volunteer: \_\_\_\_\_

REFERENCES: Please list at least one professional reference.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_

VOLUNTEER AGREEMENT

*I agree to donate my services to the Ferguson House, and understand that I will not be paid. I understand that the Ferguson House may take photographs of me for publications or other uses. I agree to abide by Ferguson House rules, regulations and policies, and will work under the direction of its staff. I understand that my volunteer services will be terminated if I do not abide by Ferguson House rules, regulations and policies. I authorize Ferguson House staff to investigate all statements made in this application, and to do a background check.*

Volunteer Signature: \_\_\_\_\_

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

If you have questions, contact Allison La Duke at 471-5417 or [allison.laduke@nebraska.gov](mailto:allison.laduke@nebraska.gov)

THANK YOU!

THANK YOU!

THANK YOU!

FOR FERGUSON HOUSE USE:

Contacted: \_\_\_\_\_ References Ckd.: \_\_\_\_\_ Interviewed: \_\_\_\_\_ Placed: \_\_\_\_\_

Evaluated: \_\_\_\_\_ Departed: \_\_\_\_\_