



*Volunteer/Intern Application*

**Mission Statement:**

Imagine That! Kansas City is an innovative and creative arts studio for adults with developmental disabilities located in the Crossroads Arts District. We aim to provide individuals who participate with the tools and materials to create art and the supports to define themselves as artists. The studio's clients are supported by a team of trained artists that strive to integrate the studio into the larger art community locally, nationally, and internationally.

Today's Date: \_\_\_\_\_

**CONTACT INFORMATION:**

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

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

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

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

Email Address: \_\_\_\_\_

In case of an emergency, who would you like us to notify?

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

Cell Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

PLEASE RETURN TO: Jillian Youngbird, Imagine That! Outreach Coordinator  
2010 McGee Street, Kansas City, Missouri 64108 [imagineathat@rhd.org](mailto:imagineathat@rhd.org) 816.421.1481

CRIMINAL HISTORY:

All volunteers and interns are required to have a background check prior to working at Imagine That. Have you ever been convicted of a felony? Yes No  
If yes, please disclose the nature, date(s), and location(s) of the conviction(s):

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PERSONAL AND PROFESSIONAL INFORMATION:

Please describe your school experience and any relevant degrees/certificates:

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Please describe any relevant art training or experience (personal or professional):

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Please list specific skills that you possess that may benefit Imagine That:

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Please list two non-relative personal or professional references:

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

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

Phone and/or Email: \_\_\_\_\_

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

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

Phone and/or Email: \_\_\_\_\_

Our hours of operation are 9:00 a.m. to 4:00 p.m., Monday through Friday. Our studio art program runs 9:30a.m. to 3:30 p.m.

First Friday events are the first Friday of every month, with the exception of December through February, 6:00 p.m. to 9:00 p.m.

How much time can you commit to volunteering? \_\_\_\_\_hours/week or month

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

Length of Commitment: One time / Occasionally / 3-6 months / 6 months or more

Please indicate the time of day you are available:

Monday \_\_\_\_ a.m./p.m.- \_\_\_\_ a.m./p.m.

Tuesday \_\_\_\_ a.m./p.m.- \_\_\_\_ a.m./p.m.

Wednesday \_\_\_\_ a.m./p.m.- \_\_\_\_ a.m. /p.m.

Thursday \_\_\_\_ a.m./p.m.- \_\_\_\_ a.m. /p.m.

Friday \_\_\_\_ a.m./p.m.- \_\_\_\_ a.m. /p.m.

How did you first hear about us?

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(For Internships only) Please pick your preferred area(s) for your Internship Concentration:

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Why are you interested in volunteering/having an internship at Imagine That?

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#### AUTHORIZATION AND AGREEMENT BY APPLICANT

1. I certify that the facts set for in this application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application may result in the rejection of my application or discharge from the volunteer/intern program.
2. I consent to having Resources for Human Development complete a criminal background check prior to volunteer.

Signature of Applicant

Date: