

CITY OF DOVER

Historical Records Transcription Volunteer Application

Volunteers are sought who will work (from disks or digital images) to carefully and diligently transcribe 17th and 18th century handwritten Dover records and convert them to printed or machine-readable form. This project will run from 2017 to 2022 with the goal of completion by 2023, Dover's 400th Anniversary.

I. Personal Information

Name _____		Date of Birth _____	
Home or Cell Phone _____		Work Phone _____	
Address _____		_____	
Street	City	State	Zip
Email address _____			
Emergency Contact: Name _____		Phone _____	

II. Employment & Volunteer History

Your experience and historical interests are an important factor in evaluating your qualifications. Please provide information on previous paid and volunteer experiences. Feel free to add additional pages if necessary.

Employer _____	Dates Employed _____
Position/Title _____	
Duties:	
Employer _____	Dates Employed _____
Position/Title _____	
Duties:	
Volunteer position _____	Dates _____
Duties:	

III. Education Information

Highest level of education completed: ___ High School ___ Undergraduate

___ Post-Graduate ___ Doctorate

Please list all degrees: _____

Please note any other skills and/or special knowledge you have which might be beneficial to this project:

IV. Time & Access

How much time might you be able to devote to this project? ___ hours per week (Best guess estimate only. No firm commitment is required.)

Are you willing to attend a class to learn proper transcription techniques and standards?

YES _____ NO _____

Are you able to work from home via an Internet connection? YES _____ NO _____

Do you own a device capable of reading a CD or DVD? YES _____ NO _____

Do you have an interest in joining the City of Dover's soon-to-be-formed 400th Anniversary (2023) Committee? YES _____ NO _____

Do you have ideas for programs, events, commemorations, parades, etc. that you feel should be considered as Dover plans its 400th anniversary celebration? Please attach additional sheets as necessary.

V. References

Please list two local references who are not a present employer or a relative:

NAME _____ Phone _____

NAME _____ Phone _____

Please sign below after you have read the following statements.

- I understand that volunteers are recognized by the public as representatives of the City and shall be guided by the same work, behavior, and dress codes as employees.
- I understand that volunteers will not be placed in positions that could jeopardize the City's ability to operate if a volunteer failed to report to work.
- I understand that if I am unable to fulfill a scheduled time for any reason, I am to notify my project supervisor.
- I understand that if I miss my scheduled date and time of service without prior notification, my volunteer opportunity may be terminated upon the third such instance.
- I understand that the City of Dover reserves the right to screen volunteers and will not accept as a volunteer anyone who would jeopardize any aspect of this project. All volunteers are subject to a criminal background check, and I hereby agree to the background check.

APPLICANT'S SIGNATURE _____ DATE _____