



## Application for Student Docent Program *Please attach to Guild Enrollment Form*

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

WHY ARE YOU INTERESTED IN BEING A PART OF THE DOCENT PROGRAM?

PLEASE LIST ANY SPECIAL SKILLS THAT MIGHT BE IMPORTANT TO YOU AS A DOCENT?

DO YOU HAVE PUBLIC SPEAKING EXPERIENCE OR EXPERIENCE WORKING WITH THE PUBLIC? PLEASE LIST.

HOW DID YOU HEAR ABOUT THE STUDENT DOCENT PROGRAM?

WHEN ARE YOU AVAILABLE TO GIVE TOURS? (I.E. MONDAYS AFTER 3PM, TUESDAYS BEFORE 1PM ETC.)