

**National Museum of the American Sailor**  
**2022 SeaPerch Volunteer Application Form**

Please complete this application form if you are interested in becoming a National Museum of the American Sailor volunteer. Please email completed forms to:  
[NHHC\\_NMAS@us.navy.mil](mailto:NHHC_NMAS@us.navy.mil)

**CONTACT INFORMATION**

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_

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

Organization (i.e. RTC, Navy League, GLAPOA, etc.): \_\_\_\_\_

**EMERGENCY CONTACT**

In the event of an emergency, who should the National Museum of the American Sailor contact?

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

Telephone Number: \_\_\_\_\_

**VOLUNTEER POSITIONS:**

Please indicate how you would like to volunteer. Please note: there are a set number of openings for each position and while we'd like to accommodate everyone's first choice, there may be times when that is not possible. All positions are first come, first served. Lunch and refreshments will be provided to all volunteers. (Indicate your first and second choice of volunteer positions next to the corresponding shift):

Position	Shift #1		Shift #2	
Check-in Table	0900-1200			
Competition Judges*	0930-1200		1200-1430	
Divers	0930-1200		1200-1430	
Information Table	0900-1200		1200-1500	

Pit Crew	0900-1500			
Awards Support	1200-1430			
Set-up/Take Down Support	0700-0900		1530-1730	

*\*Requires a mandatory one hour training session on Saturday, 26 MAR, 1400-1500*

**SAFETY AND SECURITY:**

Being that this event will be taking place at a school, all volunteers who are **not** active duty or Department of Defense personnel must complete a SECNAV 5512 background check form. This form must be completed and cleared by Naval Station Great Lakes before the volunteer will be added to the schedule. By initialing, you acknowledge that you are an active duty volunteer, Department of Defense personnel, or agree to complete the required background check form.

\_\_\_\_\_ (initial)

All volunteers will be required to show proof of vaccination or a negative COVID-19 test (taken no more than 48-hours beforehand) upon arriving to the event. By initialing, you acknowledge that you will show proof of vaccination or a negative COVID-19 test in order to volunteer.

\_\_\_\_\_ (initial)

**Privacy Notice:**

This form requests you to provide information subject to the Privacy Act of 1974 (5 U.S. Code 552a). If you choose to provide your personally identifiable information (PII), such as filling out a form with e-mail and/or postal addresses so that the United States Navy may contact you, your information will only be used to respond to your request. The information you provide will only be shared with another government agency if your inquiry relates to that agency, or as otherwise required by law. Your information will not be given to any private organizations. NMAS never collects information for commercial marketing. While you must provide an e-mail address or postal address for a response, we recommend that you NOT include any other PII, especially Social Security numbers. The Social Security Administration offers additional guidance on sharing your Social Security number. If you have any questions or comments about the information presented here, please contact NMAS staff.

**I Agree**

I understand and agree that submitting this application does not automatically register me as a National Museum of the American Sailor volunteer for the 2022 SeaPerch event and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering.

By signing this form, I attest that the information provided is true and accurate.

**Signature/Date:** \_\_\_\_\_