



Volunteer Application

Contact Information

Name _____

Address _____

Home Phone _____ Cell Phone _____

E-Mail Address _____ Age (if under 18) _____

Availability

How long do you wish to volunteer? _____ Specify # of hours _____ I can commit to a regular schedule.

During which days and times are you available for volunteer assignments?

Monday Thursday Mornings
 Tuesday Friday Afternoons
 Wednesday Saturday Late afternoons

Interests

Why are you interested in volunteering? _____

In which areas are you interested in volunteering? (Options vary by branch)

Special Skills or Qualifications

What skills do you have from previous employment, volunteer work, or other activities that will benefit the library?

Emergency Contact

Name _____

Home Phone _____ Work or other # _____

Signature

Signature _____ Date _____

Parent's signature (if under 18) _____ Date _____

For Library Staff:

- _____ Background check form
- _____ Release Waiver
- _____ Volunteer Information Sheet