## Red Jacket Community Library Volunteer Application Form

**Guidelines:** Volunteers must be 12 years of age or older. Volunteers under the age of 18 require a parent's signature. Volunteers should call the library or the library director if they cannot come in at their scheduled time. If a volunteer must end their service, they should notify the library as soon as possible. The names of all volunteers will appear on an annual library donation list.

Please print clearly and complete each section.

Your contact information		
Name Date		
Street		
City		
Phone (Main) Phone (Other)		
E-mail		
Person to contact in the event of any emergency		
Name		
Relationship		
Address		
Phone (Main) Phone (Other)	Phone (Other)	
E-mail		
If this is a required service program:  [] School Requirement: How many hours Date to continuous Service: Agency		
Program Contact Name Phone		
Your Interests  Please check all that apply. All activities may not be available at all on matching current needs of the library with volunteers' skills and	d experience.	
Activities: [] Dust Shelves [] Shelve Books [] General Cleaning [] F [] Assist with Programs/Events [] Summer Reading [] Garden [] C [] Outreach to places outside of the Library [] Surveys [] Mailings [] Indexing/Filing [] Display & Signage [] Research [] Publicity [] C [] Shelf Read [] Book Sale [] Filing [] Web Site [] Other	Outdoor Projects [] Data Entry Computer Tutor	

Red Jacket Community Library Policy Manual Appendix 1N | Reference Policy 400-16 Volunteer Application

## **Your Availability**

Please write in the times you would be available to volunteer below.

Please check the website for current hours. Most volunteer work will be performed during these hours, but there may be additional volunteer opportunities outside of the library opening hours.

I am available Mondays from	to	
I am available Tuesdays from	to	-
I am available Wednesdays from	to	-
I am available Thursdays from	to	
I am available Fridays from	to	
I am available Saturdays from	to	
How many hours do you	wish to work each week?	
How many hours do you	wish to work each month	?
I will be available to <b>volunteer</b> be	ginning date:	
Please sign below when you both pages.	have read and unders	tood all statements on
been given voluntarily. I understa	and that this information n	tion are true and correct, and have hay be disclosed to any party with munity Library from any liability for
I understand that I will not be pai to the Library.	d for my services as a volu	inteer and I am giving my time freely
I understand that my volunteer so cause and with or without notice	•	e for any reason with or without
Volunteer Applicant's Signature:		Date:
Parent/Guardian's Signature: (Required if the applicant is under		Date: