



GENERAL INFORMATION

Last Name, First Name, MI

Birthdate

Address

Email

Home Phone

Cell

Emergency Contact

Phone

VOLUNTEER EXPERIENCE AND SKILLS

Have you previously worked/volunteered at a library? If so, what duties did you perform?

Do you speak other languages? If so, what language(s) do you speak and at what level?

What skills or experiences do you have that would be beneficial as a library volunteer?

Why would you like to volunteer at the Wautoma Public Library?

SCHEDULE

Please check the times you would be available to volunteer

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening						

REFERENCES

Please provide contact information for two references (must be over 18 years old and not members of your family)

Name	Relationship	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	Relationship	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

VOLUNTEER OPPORTUNITIES

Please check areas of interest (Note: Opportunities are subject to availability and library need)

- Home Service ***
Deliver library materials to homebound patrons
- Program assistance- Circle preferred age(s): Children Teen Adult**
Assist with activities, preparation, cleanup, and room monitoring during programs as needed
- Light Housekeeping**
Dust the bookshelves, clean toys, etc.
- Collection assistance**
Assist with withdrawal of materials or the organization and sorting of donations
- Publicity**
Post program flyers around town
- Holds processing and phone calls**
Sort through and scan delivery items and notify patrons of hold availability
- Book search and shelving**
Search for books on the holds list and shelve returned books
- Special Projects**
Assist staff with short-term projects as needed
- I would like more information about the Friends of the Wautoma Public Library**

***Duties require a valid driver's license, auto insurance, and access to a vehicle.**

In signing this form, I acknowledge that my services for the library are free and are intended as a contribution of public service for the library, its patrons, and the community. I agree to abide by the rules of conduct governing the staff of the library in performing my services. I agree to keep confidential any library information to protect and respect the individual's right to privacy. As a volunteer, I hereby acknowledge that I will perform my services in good faith and to the best of my ability under the general guidelines provided.

I understand my eligibility is contingent upon a background check, an interview, and the availability of work. I will commit to volunteering for a minimum of four months and will notify the volunteer coordinator or director should I decide to stop volunteering after the initial period. If I cannot work an assigned shift, I will notify the library as soon as possible.

If my duties include driving on behalf of the library, I understand I must annually provide a copy of my driver's license and insurance upon request.

The Wautoma Public Library appreciates your willingness to volunteer your services to assist the library, its patrons and the community. Personal information collected for these purposes will only be used internally at the library and will only be disclosed to you, except if the law requires disclosure to a third party. Files are kept one year from the date of inactivity.

Signature of Applicant _____ Date _____
Signature of Parent/Guardian _____ Date _____