



Volunteer Application

~ Creswell Library ~

FOR LIBRARY USE ONLY

- ___ Training date _____
- ___ Name tag _____
- ___ Explained confidentiality clause _____
- ___ Add to Gmail contacts _____
- ___ Add to paper contacts _____
- ___ Add to special projects list _____

Name: _____ Date: _____

CONTACT INFORMATION

Preferred name if different: _____ E-mail: _____

Mailing Address: _____ Zip: _____

Home Address: _____ City/State: _____

Phone: _____ Cell: _____

Preferred method of contact: _____ Date of Birth: _____

EMERGENCY CONTACT (We must have a contact person!)

Name & Relationship: _____ Phone: _____

EDUCATION

Last grade completed _____ Degree _____

I am currently a student at _____

EXPERIENCE

I have never volunteered

I have volunteer experience: (Please list volunteer experience, dates & duties.)

Other work experience: _____

Physical limitations: (Please mention any difficulty with hearing, vision, bending, and lifting. Some jobs require this ability, others do not.) _____

SPECIAL SKILLS & INTERESTS

VOLUNTEER OPPORTUNITIES

- Service Desk** (3 hr. shifts—material check-in/out, assisting patrons, shelving, etc.)
- Cataloging** (Enter materials into the computer database using very specific rules)
- Processing** (Cover and label books, clean and mend materials)
- Shelving** (Shelve books, magazines, and other materials, put shelves in order)
- Maintenance** (Light cleaning and other tasks as needed)
- Storytime** (Assist with crafts for children)
- Summer Reading** (Help with various activities for youth throughout the summer)
- Book Club** (Assist with organization or book discussion)
- Friends Book Sales** (Set-up, sales, take-down, sort donations in Annex)
- Friends Book Sale Shelf** (Replenish in-library sale shelf with books as needed)
- 4th of July Parade** (Help with float, costumes, and/or participate in parade)
- Deliver Materials to Homebound Patrons**

- Friends of the Creswell Library**
- Creswell Public Library Foundation**
- Special Projects** _____

SCHEDULING

Time commitment per week _____ or month _____. Please list days and times available:

Some positions require a criminal background check. If needed, an authorization form will be provided.

REFERENCES

List two employers, supervisors, teachers or non-relatives we may contact for a reference.

Name: _____ Relationship: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____

Phone: _____ Email: _____

I understand that my volunteer work is a commitment. When I cannot work at the assigned time, I will notify the Library Volunteer Coordinator or Director as soon as possible. I agree to follow all Library and Volunteer policies and procedures and I understand that while working as a volunteer, I will positively represent the Library. I understand that in my capacity as a volunteer, I may come into contact with confidential information. I agree to protect this information to the best of my abilities as a volunteer and not to divulge it during or after my service as a volunteer has ended.

Signature: _____ Date: _____