

VOLUNTEER APPLICATION

ELKIN PUBLIC LIBRARY

A member of the Northwestern Regional Library

Today's Date _____

First Name _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Your age _____ Do you have any physical limitations? _____

What times and days are you available to volunteer? (Please circle all appropriate ones)

AM PM Mon Tues Wed Thurs Fri Other _____

Have you ever volunteered for a library? Yes No What tasks did you perform? _____

What skills or interests can you offer? _____

List the two most recent places you worked or two service groups in which you recently participated and basic tasks performed _____

Have you been convicted of an offense in an adult court? Yes No If yes, please explain _____

Why do you want to volunteer? _____ Personal satisfaction _____ skill development
_____ required by school _____ required by a court or attorney _____ student service learning credit

Please provide as a reference the name of one person not related to you

Name _____ Phone _____

How do you know this person? _____

The information I have provided on this application is true and complete to the best of my knowledge. I acknowledge that the volunteer work I agree to perform may involve risk of personal injury or death. I agree to perform the duties assigned to me. I accept responsibility for my personal safety or that of my child.

Volunteer's signature _____ Date _____

Parent or guardian signature (if under age 18) _____ Date _____