

Mahomet Public Library Volunteer Application

General Information

Name: _____ Date: _____

Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Are you a student? No Yes, at this school: _____

Age (if under 18): _____

Person to Contact in Case of Emergency

Name: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

Skills and Interests

Previous Work, Volunteer, or Computer Experience: (please include any special skills, interests, or training that could be useful at the Library)

Availability and Interests

First Date Available: _____ Available times (please check all that apply):

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	X						
Afternoon							
Evening	X					X	X

Activities you would like to do (please check all that apply):

<input type="checkbox"/>	Shelf Reading	<input type="checkbox"/>	Shelving Materials	<input type="checkbox"/>	Processing Materials
<input type="checkbox"/>	Homebound Delivery	<input type="checkbox"/>	Recycling	<input type="checkbox"/>	Light Repair Work
<input type="checkbox"/>	Dusting Shelves	<input type="checkbox"/>	Light Cleaning	<input type="checkbox"/>	Pick Up Trash Outside
<input type="checkbox"/>	Other (please describe):				

Note: not all activities will be available at all times.

Activities you would prefer not to do:

Physical limitations that prevent you from doing certain tasks:

References

Name: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

Are you willing to submit to a criminal and/or drivers' background check if required? Yes No

Agreement and Signature

I certify that the statements made in this volunteer application are true and correct, and have been given voluntarily.

I understand that the Mahomet Public Library District reserves the right to screen volunteers, to accept or reject any applications, and to place applicants in specific positions based on the needs of the Library. I understand that if there are no suitable volunteer opportunities for my skills, my application will be kept on file for a period of one (1) year and I will be called if a project is identified which matches my interests or qualifications.

I understand that I will not be paid for my services as a volunteer and I am giving my time freely to the Library.

I understand that both the Library and I have the right to terminate my volunteer service at any time for any reason with or without cause.

Signature

Date

Parent or Guardian (if applicant is under 18)

Date

For Library Use Only

Received by: (staff name) _____ **Date:** _____

Interviewed by: (staff name) _____ **Date:** _____

Comments:

