

VOLUNTEER APPLICATION FILE

NAME _____

PHONE _____

ADDRESS _____

EMERGENCY CONTACT _____

EMERGENCY PHONE _____

1. List any skills and /or work experience (including volunteer work) you feel might be applicable to library work.
2. Do you have a day and/or time preference.
3. Would you prefer to have a regular work schedule or work on a more flexible time basis.
4. How many hours per week or month would you be willing to work.
5. What made you consider volunteering at the library.

Applicant Signature: _____

Office Use: Librarian _____ Date _____
Referral _____