



Volunteer Application

Name _____ Date _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address _____

Age _____ Phone Number _____

Emergency Contact:

Name _____ Phone Number _____

Have you volunteered at a library before? ___ Yes ___ No

If yes, which library _____

Do you have any special skills or interests? _____

Do you have any physical limitations that might restrict your activity?

Briefly list your work experience, both paid and volunteer

Are you volunteering as a Community Service requirement? ___ Yes ___ No

If yes, number of hours to fill _____ to be completed by _____

Check any categories that interest you:

- Shelving and shelf reading Working with Public Circulation
 Processing books Fundraising assistance Clerical jobs
 Children's Library Programming Other _____

What days are you available to work? Check all boxes that apply

	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
<i>Morning</i>						
<i>Afternoon</i>						
<i>Evening</i>						

Have you ever been convicted of a felony or misdemeanor? Yes No

(Conviction of a crime is not necessarily a bar to volunteering.)

If yes, please explain: _____

Please provide a reference that we may contact:

Name _____ Phone _____

Address _____

Volunteer Agreement

My signature authorizes Snyder County Libraries, Inc. to verify any of the information on this application and to secure information from personal reference. I understand that as a volunteer I am not entitled to monetary compensation for the work that I perform or be entitled to worker's compensation or group benefits in the event of injury. Snyder County Libraries, Inc. Volunteer Program reserves the right to evaluate volunteers sometime after placement and the right to terminate the volunteer's services should responsibilities not be fulfilled satisfactorily.

Volunteer Signature

Date