Library Volunteer Application

Date:		Birth Month:	Day:	<u> </u>
Name:				
Address:				
City/State/Zip:				
Telephone (Daytime)				
Email address:				
Emergency contact person	:	Teleph	ione:	
Education:				
High School/GED:				
College/University				
Name, Location, Dates, Degr	ees/Areas of Study:			
Work Experience:				
Volunteer Experience:				
Skills				
Computers: (check all that a		•		
Other computer skills:				_
				<u></u>
Other skills and interests:				

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Preferred days:		Times available:	Availah	aility:		
Monday Saturday Sunday		Morning from		Availability: Regular (weekly, bi-weekly)		
		to		rained substitute		
Yuesday Sunda Wednesday	/			pecial project(s)		
*		Afternoon from		easons not available:		
Thursday				•		
Friday		to				
Areas of interest: Please check						
On-call, special events	Со	mputer volunteer		Processing		
Shelf volunteer		nealogy		Sorter Room		
Greeter		ildren's multi-purpose volu	ınteer	Other		
	I .	' '				
Library website Library newsletter	_	Library staff Library volunteer		Other		
How did you learn about the Do	nald W. Da	ovnolds Library Voluntoo	r Droaram?			
	_			Other		
•						
Friends of the Library		Volunteer Fair				
Vhy are you interested in volui	nteering at	the Library?				
Would you like to join the Frien						
Why are you interested in volui Would you like to join the Frien						
Would you like to join the Frien	ds of the L ne Library v	ibrary? (\$5 annual dues) volunteer program! We w	ill contact y	ou soon.		

May 2, 2017