



Volunteer Application

Date: _____

Branch Preference: _____

Contact Information

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (Zip Code)

Phone: _____ Home Work Cell Email: _____

Demographics

You may optionally provide the following information. It is used only to help us get a better idea of the demographic make-up of our volunteers.

Birthday: ____/____/____ Age Range (Circle): Adult Teen Juvenile

References

Please provide the following information for two references that are not related to you.

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (Zip Code)

Phone: _____ Email: _____

Relationship (Circle One):

Co-Worker Supervisor Friend Teacher Other _____

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (Zip Code)

Phone: _____ Email: _____

Relationship (Circle One):

Co-Worker Supervisor Friend Teacher Other _____

Volunteering With Shasta Public Libraries

Why do you wish to volunteer with the library? What do you hope to gain from this experience?

Skills and Experience

Please indicate any skills or experience you feel may relate to volunteering in a public library.

Ability to Volunteer

Please indicate the times you will be able to volunteer.

Days Available (Circle): Mon Tues Wed Thurs Fri Sat Sun

Times Available: A.M. P. M. Total Hours Per Week Available: _____

Do you prefer to work: _____ Independently _____ With Others _____ Projects Only

Are there any limitations that might restrict your volunteer activities? _____

If yes, please explain:

Agreement

I understand and agree that submitting this application does not automatically register me as a Shasta Public Libraries volunteer, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering. Additionally, I authorize Shasta Public Libraries to conduct a criminal background check and contact my references.

By signing this form, I attest that the information I have provided on the form is true and accurate to the best of my knowledge.

Signature: _____ Date: _____