

## Volunteer Information



Name_____	Date:_____
E-mail address: _____	
Address: _____	
City, State, Zip: _____	
Phone(s):_____	

**Volunteer Status** (Check one):  New Volunteer  Current Volunteer

**Age Category** (Check one): Adult (18-54) \_\_\_ Senior (55+) \_\_\_  
(If under age 18, see the Youth Services staff at your local Henderson Library)

\*Teens interested in volunteering will be referred to Youth Services.

**What day(s) of the week are you available for volunteer tasks?**

Sun\_\_\_ Mon\_\_\_ Tue\_\_\_ Wed\_\_\_ Thu\_\_\_ Fri\_\_\_ Sat\_\_\_

**What time is most convenient?** Morning\_\_\_ Afternoon\_\_\_ Evening\_\_\_

**Do you have a preference for a library where you could assist?**

Paseo Verde\_\_\_ Gibson\_\_\_ Malcolm\_\_\_ Green Valley\_\_\_

**Please check the departments that are of interest to you.**

Acquisitions (Processing books/materials)\_\_\_ Circulation\_\_\_  
Reference\_\_\_ Technology\_\_\_ Heritage Room\_\_\_ Young Adult \_\_\_  
Help Desk Docent \_\_\_ Computer Class Asst \_\_\_  
Children's (requires background check at volunteer's expense) \_\_\_

**Please check programs that are of interest to you.**

Book Sales: \_\_\_ Library Tree Lane: \_\_\_ Special Events: \_\_\_ Other: \_\_\_

Are you willing to be "on call" for tasks as they arise? Yes: \_\_\_ No: \_\_\_

Do you have skills or talents that you would like to share?  
\_\_\_\_\_  
\_\_\_\_\_

**For Office Use Only** Date of Volunteer Orientation: \_\_\_\_\_

Volunteer Data Entered or Revised—Date: \_\_\_\_\_ Initials: \_\_\_\_\_

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