

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): Teen (13-17*) ___ Adult (18-54) ___ Senior (55+) ___

*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 ___ James I. Gibson ___ Lydia Malcolm ___ Pittman ___

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 ___

Literacy: (requires background check at volunteer's expense) ___

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 ___ Homebound ___

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: _____