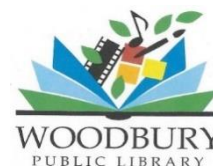


# VOLUNTEER APPLICATION

Thank you for choosing to make a difference in your community. If there are no openings at the time you apply, your application will be kept on file for future consideration.



## GENERAL INFORMATION:

Last Name		First Name		Date Received
Street Address		State	Zip Code	
Phone Number	Birth Month/Day	Email Address		
Emergency Contact Name		Relationship to You		
Emergency Contact Phone Number (Home)		Emergency Contact Phone Number (Cell)		
<b>Students:</b>	School:	Grade/Age:		
Are you looking to earn community service hours?		No <input type="checkbox"/> Yes <input type="checkbox"/> How many hours are needed? _____		

## AVAILABILITY: PLEASE CHECK YOUR PREFERRED DAYS AND TIMES

	MON	TUES	WED	THURS	FRI	SAT	SUN
MORNING							
AFTERNOON							
EVENING							

## AREAS OF INTEREST: PLEASE CHECK ALL THAT APPLY

<input type="checkbox"/>	Administrative Office Support	<input type="checkbox"/>	Local History Assistant
<input type="checkbox"/>	Adult Literacy Tutor/Instructor	<input type="checkbox"/>	Maker Space Assistant
<input type="checkbox"/>	Book Cellar/Friends of the Library	<input type="checkbox"/>	Shelf Reading/Shelving
<input type="checkbox"/>	Book Repair/Technical Services Assistant	<input type="checkbox"/>	Special Events Assistant
<input type="checkbox"/>	Children's Services	<input type="checkbox"/>	Technology Assistant
<input type="checkbox"/>	Fundraising & Planning Committee for Annual Gala Event	List Other:	
<input type="checkbox"/>	Homebound Deliveries		
What special interests or hobbies do you have?			

As an approved volunteer for the Woodbury Public Library, I recognize it is my responsibility to maintain the confidentiality of all reports, records, and information that I may encounter in the course of my activities, as outlined in Sec. 11-25, the Confidentiality of Records State Statute. I understand that I may be subject to a background check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date