



VOLUNTEER WORK APPLICATION

Name: _____ Home Phone: _____
 Address: _____ Cell Phone: _____
 City: _____ Zip: _____ E-mail: _____
 In case of emergency, contact: _____ Phone: _____

Library location preferred: Dale Chrisney

I am interested in volunteering: (check all that apply)

_____ Occasional special event	_____ Regularly each week for _____ hours
_____ Weekends only	_____ Weekday mornings
_____ Summers only	_____ Weekday afternoons
_____ September – June only	_____ Weekday evenings

Age Category (Please check the category closest to your age)

___ *12-17 ___ 18-29 ___ 30-54 ___ 55-64 ___ 65+

Highest level of education

_____ Jr. High School	_____ High School/GED	_____ Undergraduate Degree
_____ Graduate Degree	_____ Post Graduate Degree	_____ Other

Please summarize special skills and qualifications you have acquired through employment, education or volunteering as well as any hobbies, sports, etc. _____

Why are you interested in volunteering with the Lincoln Heritage Public Library? _____

Area(s) of volunteering that interest you:

_____ Shelving and organizing materials	_____ Clerical
_____ Helping with children’s programs	_____ Making craft materials for programs
_____ Helping with Summer Reading	_____ Cleaning Books, DVD’s, Audio cassettes

What do you hope to accomplish through your volunteer service?

_____ Required Community Service	_____ MLIS practicum assignment
_____ Build work skills & experience	_____ Fulfill high school graduation requirements
_____ Other _____	_____ Unpaid internship

How did you learn about the library’s volunteer opportunities?

_____ Friend	_____ Family member	_____ A library volunteer
_____ Library website	_____ Library staff	_____ Newspaper
_____ Other _____		

*Applicants under the age of 18 yrs. require the signature of a parent or legal guardian along with the applicant’s signature.

Please describe any physical limitations that could prohibit you from activities such as: bending, stretching, climbing on step stools, carrying bags of books, or sitting for long periods: _____

Employment/Volunteer History (Please list your most recent employment and/or volunteer activities first)

Employer/Volunteer Agency _____

Address _____

Telephone Number _____ Supervisor's Name _____

Position/Assignment _____ May we contact them? _____ Yes _____ No

Start Date _____ End Date _____ Reason for leaving _____

Employer/Volunteer Agency _____

Address _____

Telephone Number _____ Supervisor's Name _____

Position/Assignment _____ May we contact them? _____ Yes _____ No

Start Date _____ End Date _____ Reason for leaving _____

Employer/Volunteer Agency _____

Address _____

Telephone Number _____ Supervisor's Name _____

Position/Assignment _____ May we contact them? _____ Yes _____ No

Start Date _____ End Date _____ Reason for leaving _____

Please use the space below to tell us what volunteering means to you and how your experiences have supported that.

References (Non-household references are required)

Name _____ Phone Number _____
Number of years you have known this person _____
How do you know this person (i.e. co-worker, school, etc.)? _____

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How do you know this person (i.e. co-worker, school, etc.)? _____

Have you ever been an employee or a volunteer with the Lincoln Heritage Public Library?

_____ Yes _____ No

If you answered yes, please tell us what location and when you worked or served as a volunteer.

Volunteer Application Agreement and Understanding Statement

In order to ensure the safety of the LHPL staff members, patrons and other volunteers, the LHPL will conduct a criminal background check for specified volunteer positions as part of the in-take process. Criminal background checks are completed at the Library's expense and are conducted in compliance with the Fair Credit Reporting Act.

I understand and agree that the LHPL may investigate any information that I furnish in association with this volunteer application and perform whatever background investigation the LHPL deems appropriate. Any misrepresentation on this form can be cause for withdrawal of any offer or termination of a volunteer arrangement.

If I become a volunteer at the LHPL, I understand that it is for no definite period of time. I understand that I will not be paid for my services as a volunteer and I expect no compensation.

If offered a volunteer position I agree to comply with all lawful rules, policies, standards and guidelines of the LHPL.

***Applicants under the age of 18 yrs. require the signature of a parent or legal guardian along with the applicant's signature.**

Print Name _____

Signature _____

Parent/Legal Guardian

I _____ give permission for my minor child to volunteer at the Lincoln Heritage Public Library if they are selected. I have read the qualifications, duties and time requirements for volunteering at the Library and will assist my minor child in keeping their commitment if they are selected. I understand that submission of this application is not a guarantee that my minor child will be selected, and that hours are assigned on a first come, first-served basis.

Signature _____ Date _____

Lincoln Heritage Public Library Volunteer Skills/Interest Inventory

Name _____

Phone _____

Art/Graphics/Crafts

- _____ Art Design
- _____ Art exhibits/fair
- _____ Calligraphy
- _____ Craft
- _____ Cartooning
- _____ Display/bulletin boards
- _____ Graphics
- _____ Photography/video

Clerical/Office Work

- _____ Answering phones
- _____ Clerical/office work
- _____ Filing
- _____ Photocopying
- _____ Record keeping
- _____ Telephoning

Communications/Information

- _____ Brochure/newsletter
- _____ Editing
- _____ Public speaking
- _____ Writing
- _____ Mailings

Program Support

- _____ Book discussion group leader
- _____ Clown/mime/juggler
- _____ Drama/theater arts
- _____ Music
- _____ Type: _____
- _____ Instrument(s): _____
- _____ Organize special events
- _____ Present educational programs
- _____ Topic(s): _____
- _____ Storytelling
- _____ Travel experience
- _____ Family fun fest/Kids First
- _____ Summer Reading Program

General Library Work

- _____ Shelf Reading
- _____ Creating book list

Library Research

- _____ Archives/manuscripts
- _____ Creating book list
- _____ Genealogy
- _____ Local History
- _____ Opinion Surveys/polling
- _____ Oral History

Hobbies/Interests

- _____ Carpentry
- _____ Handyman skills
- _____ Indoor plant care
- _____ Outdoor plant care
- _____ Sewing
- _____ Upholstery

Outreach Services

- _____ Book sales

Computer Skills

- _____ Database searches
- _____ Data entry
- _____ Internet Assistance
- _____ E-mail
- _____ Desktop publishing
- _____ Spreadsheet experience
- _____ Word Processing

Describe software you are familiar with: _____

Other: _____
