

NORTH VALLEY PUBLIC LIBRARY

VOLUNTEER APPLICATION

Name: _____ Date: _____

Address: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

EMERGENCY CONTACT: _____

Best time to be reached: _____

How did you hear about the Library's volunteer program? _____

Why are you interested in volunteering at the Library? _____

What skills or abilities do you have to bring to a volunteer position? _____

Please check volunteer areas that interest you:

- Working with children
- Working with customers
- Working with books
- Working with technology
- Working on remodeling
- Other _____

Please circle times & days preferred:

Early Day Afternoon Evenings

Monday Tuesday Wednesday Thursday Friday Saturday

Volunteer experience: _____

Work experience: _____

Hobbies: _____

Personal reference name & phone: _____

School/Business/Volunteer related reference: _____

Age Group: Under 18 _____ Over 18 _____

If under 18 years old, please fill out the following:

Age: _____ Grade: _____ School: _____

Additional Comments

I hereby certify that the information on the above application is true and is complete to the best of my knowledge. With my signature, I acknowledge that the North Valley Public Library reserves the right to verify any of the information on this application and to secure employment-related information deemed necessary from former employers or personal references and information needed to complete a criminal background check.

Signature: _____ **Date:** _____

Parent/Guardian Signature (if under 18): _____

RETURN TO:

North Valley Public Library
208 Main Street
Stevensville, MT 59870

acs: 11/07