



VOLUNTEER APPLICATION

PERSONAL INFORMATION:
(Please Print All Information)

Last Name First Name Middle Initial

Address City State Zip Code

Phone No.: _____ E-Mail _____

Date of Birth: ____ / ____ / ____

Are you a year-round resident? ____ Yes ____ No
If not, what months are you available? _____

WORK STATUS: ____ Employed ____ Retired ____ Unemployed ____ Student
If employed current place of employment: _____ Phone: _____

VOLUNTEER OPPORTUNITIES AVAILABLE: (please rank the opportunities available from 1-4 based on your interest level with 1 being the most interested and 4 being the least interested)

____ *Circulation Responsibilities* – Duties include but are not limited to shelving library items, maintaining shelf appearance, pulling on shelf hold items, and checking in returned books.

____ *Children's Floor Worker* – Duties include but are not limited to shelving children's items, maintaining cleanliness of children's room.

____ *Book Nook* – Duties include but are not limited to evaluating, sorting, and pricing donating items for resale.

____ *Teen Tech Team* – Duties include but are not limited to helping patrons with tech-related questions.

VOLUNTEER AVAILABILITY: (please circle the days and times you are available to volunteer)

**Note: Volunteering times are flexible upon request*

MON. 9-12 TUES. 9-12 WED. 9-12 THURS. 9-12 FRI. 9-12 SAT. 9-12

MON. 12-3 TUES. 12-3 WED. 12-3 THURS. 12-3 FRI. 12-3 SAT. 12-3

MON. 3-5 TUES. 3-5 WED. 3-5 THURS. 3-5 FRI. 3-5 SAT. 2-4

MON. 5-8 TUES. 5-8 WED. 5-8 THURS. 5-8

HOW DID YOU HEAR ABOUT OUR VOLUNTEERING OPPORTUNITIES?

_____ Friend _____ Library Flyer _____ Road Sign _____ School Program
_____ Web Site _____ Social Media _____ Other (please specify)

Please state any Education, Experience, or Skills you have that may be of value to East Lake Community Library.

Have you ever committed, been convicted of, pled guilty to, or pled no contest to, a felony or a misdemeanor? NOTE: Conviction of a crime is not necessarily grounds for disqualification.

___NO ___YES* (*If yes, please explain): _____

TEEN APPLICANTS ONLY

→ **Minimum Age is 14 Years Old**

Would you use these volunteer hours for *Bright Futures*? Yes___ No___

Name of High School & Graduation Year _____

The information provided in this application is true in all respects, without any willful omissions. I understand that if this application is false in any way I will be dismissed without notice regardless of when the false information is discovered.

I authorize the library to conduct a background check. I certify that all the information provided on this application is accurate and complete to the best of my knowledge.

SIGNATURE

_____/_____/_____
DATE

PARENT/GUARDIAN SIGNATURE (Minor Applicants Only)

_____/_____/_____
DATE

Questions or Concerns?

Contact the Volunteer Coordinator at mirant-v@eastlakelibrary.org or 727-773-2665