

VOLUNTEER INFORMATION FORM

Date: _____

Name: _____

Current Address: _____

Phone: _____

Have you been convicted, or have you served time in a correctional institution within the past seven (7) years, for any crime, which might have some bearing on your fitness to serve as a library volunteer?

Yes _____ No _____ if yes give details on a separate sheet.

List the days and hours you are available for volunteering.

Indicate the kinds of activities or tasks you think you might be able to do or would like to learn to do in the library:

Previous volunteer/work experience, education, special training and/or hobbies:

I certify that all statements above and attached to this Information Form are true and complete to the best of my knowledge. I understand that false statements shall be sufficient cause for my volunteer activities to be discontinued by the Library.

Signature of volunteer _____

Date _____