

# ELMWOOD PARK PUBLIC LIBRARY

## Volunteer Application

### CONTACT INFORMATION

NAME	
ADDRESS	
CITY, STATE, ZIP	
HOME PHONE	
CELL PHONE	

Are you over age 18? \_\_\_\_\_ If under 18, certain restrictions to the type of work may apply. Please PRINT your parents' name

### AVAILABILITY

During which hours are you available for volunteer assignments?

Weekday mornings	Saturday mornings
Weekday afternoons	Saturday afternoons
Weekday evenings	Sunday afternoons
How many hours per week are you available?	
When would you be available to begin?	

Restrictions that might affect your availability for volunteer work (family, work schedules, physical limitations, etc.):

What qualifications/skills/experience/education/hobbies or languages do you have that you believe are relevant to your interest in working in the Library?

### LIST TWO (2) PERSONAL/PROFESSIONAL REFERENCES

NAME	RELATIONSHIP	ADDRESS	PHONE

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_