

Volunteer Application

This agreement is intended to indicate the importance with which we treat our volunteers. The intent of the agreement is to assure you both of our appreciation for your services and to indicate our commitment to make your volunteer experience both productive and meaningful. You must be at least 12 years old or in 6th grade or older to be a volunteer.

Date _____

Last Name _____ First Name _____ Date of Birth _____

Address City, State, Zip-

Email Address: _____

Daytime Phone: _____ Evening Phone _____

What is the best to communicate with you? (Check One) Day Phone Evening Phone

School Name _____ Grade that currently in? _____

1. What hours are you **available**?

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

2. Please tell us about your interests and skills and why you want to volunteer at the Library:

3. What made you decide to volunteer here?

4. What is your experience in working in the library?

5. Are your volunteer hours a requirement for a class or school ____ Yes ____ No (If yes, explain).

6. Emergency Contact: Name _____
Phone _____

I, _____, agree to serve as a volunteer for the Kirkendall Public Library and commit to the following:

1. To perform my volunteer duties to the best of my ability.
2. To adhere to Library rules and procedures.
3. To meet time and duty commitments, or to provide adequate notice so that alternate arrangements can be made.

Parent/Guardian Signature (If volunteer is under 16 years of age) _____

Date _____

Volunteer Signature _____

Date _____

It is important for the protection of our clients that each volunteer 12 years or older will be have a mandatory back ground check. Please sign below to authorize a back ground check.

Parent/ Guardian's (if volunteer is under 16 years of age)

Signature _____

Date _____

Return all applications to the

Kirkendall Public Library, 1210 NW Prairie Ridge Drive, Ankeny, Iowa 50023