

PEABODY PUBLIC LIBRARY VOLUNTEER APPLICATION FORM

PERSONAL INFORMATION

Your Name _____
Address _____
City, State, Zip _____
Phone (Daytime) _____ Phone (Evening) _____
E-mail Address: _____
Social Security # _____

Age Category

- Youth – 12-14*
 Young adult -- 15-18
 Adult – 19-50
 Senior – 51+

*signature of parent or guardian required

Emergency Contact:

Name _____
Tel. # _____

Personal References

| Name | Relationship | Telephone # |
|------|--------------|-------------|
| | | |
| | | |
| | | |

SKILLS (Mark all that Apply)

Office:

- Copy Machines Filing Typing/Keyboarding

Computers:

- MS Word MS Excel MS Publisher MS PowerPoint
 WordPerfect

Other Computer Skills:

Special Skills:

DETAILS

How did you hear about volunteer opportunities at the Peabody Public Library?

Have you ever worked for or volunteered at the Peabody Public Library?

Yes No

Why are you interested in Volunteering at the Peabody Public Library?

Commitment: Special Projects Ongoing Projects On Call as Needed

Fixed Number of Hours (specify)_____

If volunteer hours have been assigned by school or other program, please indicate:

Name of school/program: _____

Number of hours: _____

Date by which hours must be completed: _____

Volunteer Areas of Interest: (Check all that apply)

- Program Host
- Display Preparation/decorations
- Repair, Maintenance, & Cleaning of Materials
- Maintaining Organization of Books, Movies, etc.
- Setup and Cleanup for Programs
- Animal Care
- Craft Preparation
- Data Entry

"I Enjoy":

- Working Alone
- Being Around Others
- Working with seniors
- Working with Children
- Other _____

AVAILABILITY: Please indicate below the days and times you can be available

| | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
|-----------|-----|------|-----|-------|-----|-----|-----|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

Signature _____

By signing this form, I consent to a criminal background check

Date _____