

## VOLUNTEER ENROLLMENT FORM

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Other) \_\_\_\_\_

Social Security No. (opt.) \_\_\_\_\_ Drivers License No. (opt.) \_\_\_\_\_

Date of Birth \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**Branch or Link Site Location:** \_\_\_\_\_

**Availability:** Days (circle all that apply)    Mon    Tues    Wed    Thurs    Fri

Times (fill in best hours)    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

Seasonal only (list months away) \_\_\_\_\_

**Work or Volunteer Experience:** (start with most recent)

Employer \_\_\_\_\_ City/State \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Type of Job \_\_\_\_\_

Employer \_\_\_\_\_ City/State \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Type of Job \_\_\_\_\_

Employer \_\_\_\_\_ City/State \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Type of Job \_\_\_\_\_

**Education:** (check highest level)

Elementary     High School     Technical School     College     Graduate

Other training (describe) \_\_\_\_\_

**Special Skills, Talents, Hobbies:** \_\_\_\_\_

\_\_\_\_\_

**Computer Capabilities:** (check all that apply)

No experience yet     Email     Internet Use     Word processing     Spreadsheets  
 Other computer skills (describe) \_\_\_\_\_

**Interest:** Why are you interested in volunteering at your local Branch Library or Link Site?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Personal References:** (please provide two, preferably local)

<i>Name</i>	<i>Daytime Phone #</i>	<i>Relationship</i>
1. _____	_____	_____
2. _____	_____	_____

**Permission for Background Check:**

I hereby allow LARL to check my background in the following areas. (check all that apply)

- Criminal record
- Driving record
- Past employment or volunteer positions
- Educational or professional status
- Personal references

I understand that information collected during this background check will be limited to what is relevant in determining my suitability for library volunteer work, and that all such information will be kept confidential. I extend my permission to those individuals contacted to give their full and honest evaluation of my suitability for such work.

**Verification of Commitment:**

I certify that the answers contained in this enrollment form are true and complete to the best of my knowledge. My volunteer service is conditional upon verification of the facts and references supplied in this form. I understand that I am offering my services as a volunteer, not a paid employee, and that I will not be compensated for the services I provide.

(Signed) \_\_\_\_\_ (Date) \_\_\_\_\_