

## Individual Volunteer Application Form

### Personal Information

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_ Email \_\_\_\_\_

**You must be at least 12 years old to volunteer.**

Are you 18 or older? Yes  No  If no, date of birth \_\_\_\_\_

In case of emergency, notify \_\_\_\_\_

Telephone \_\_\_\_\_ Relationship \_\_\_\_\_

### Occupation and/or Education

Circle highest grade completed 9 10 11 12 College (years or degree completed) \_\_\_\_\_

Current Employer and Position \_\_\_\_\_

Are you a student?  Yes  No

Which school do you attend? \_\_\_\_\_

### Volunteer Interests

At which library would you like to volunteer?

Bensalem	Doylestown	Langhorne	Levittown
Perkasie	Quakertown	Yardley	

For each day, indicate times you are available to work a two-or-three-hour shift:

Mon: \_\_\_ to \_\_\_ Tues: \_\_\_ to \_\_\_ Wed: \_\_\_ to \_\_\_ Thu: \_\_\_ to \_\_\_ Fri: \_\_\_ to \_\_\_ Sat: \_\_\_ to \_\_\_ Sun: \_\_\_ to \_\_\_

### Please mark the type of work you would like to do.

Book Sale Assistant	Building Caregiver	Collection Care Assistant	Community Ambassador
Greeter	Grounds Caregiver	Holds Processor	Shelf Organizer
Special Events Assistant	Not Sure		

**Volunteering**

How will volunteering at the library help you meet your personal goals?

**Skills**

What special interests and skills do you have that will help us to match you with the best assignment?

**Accommodations**

Please list any physical or other accommodations you may require:

**Reference Information**

Please give two personal or professional references.

Check one:      Personal      Professional (e.g., teacher or supervisor)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Check one:      Personal      Professional (e.g., teacher or supervisor)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Have you ever been convicted of a crime that has not been expunged or pardoned, other than a minor traffic violation?     Yes     No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A conviction will not necessarily preclude your volunteering. This information will be used only for volunteer-related purposes and only to the extent permitted by applicable law.

*I authorize BCFL to make inquiries as to my experience and character and to certify that all statements made on this application are true.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

*I understand if I am under age 18 I need to have a parent or guardian signature.*