# Volunteer Application

## Contact Information

<table>
<thead>
<tr>
<th>Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City, State ZIP:</td>
<td></td>
</tr>
<tr>
<td>Home Phone:</td>
<td></td>
</tr>
<tr>
<td>Cell/Work Phone:</td>
<td></td>
</tr>
<tr>
<td>E-Mail Address:</td>
<td></td>
</tr>
</tbody>
</table>

(If under 18) DOB: ___/___/___  Expected Graduation: ____________________________

Current School: ____________________________

## Availability & Requirements

Please indicate the days and times you are available to volunteer.

<table>
<thead>
<tr>
<th>TIME:</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
</table>

Are you volunteering to fulfill a specific service requirement?  ____ Yes  ____ No

If so, please describe & indicate requirements:

Please list any special needs or allergies:

## Interests

Please indicate your areas of interest.

___ Putting books in order  ___ Homebound deliveries
___ Computer data entry  ___ Publicity
___ Filing and photocopying  ___ Audio-visual repair
___ Taping/pasting/labeling books  ___ Program Assistant
___ Other (please describe) __________________________________________________________

## Special Skills or Qualifications

What special skills, interests, or training do you have?

---

**Volunteer Application**

**Contact Information**

<table>
<thead>
<tr>
<th>Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City, State ZIP:</td>
<td></td>
</tr>
<tr>
<td>Home Phone:</td>
<td></td>
</tr>
<tr>
<td>Cell/Work Phone:</td>
<td></td>
</tr>
<tr>
<td>E-Mail Address:</td>
<td></td>
</tr>
</tbody>
</table>

(If under 18) DOB: ___/___/___  Expected Graduation: ____________________________

Current School: ____________________________

## Availability & Requirements

Please indicate the days and times you are available to volunteer.

<table>
<thead>
<tr>
<th>TIME:</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
</table>

Are you volunteering to fulfill a specific service requirement?  ____ Yes  ____ No

If so, please describe & indicate requirements:

Please list any special needs or allergies:

## Interests

Please indicate your areas of interest.

___ Putting books in order  ___ Homebound deliveries
___ Computer data entry  ___ Publicity
___ Filing and photocopying  ___ Audio-visual repair
___ Taping/pasting/labeling books  ___ Program Assistant
___ Other (please describe) __________________________________________________________

## Special Skills or Qualifications

What special skills, interests, or training do you have?

---
Previous Volunteer Experience
Summarize your previous volunteer experience.

Personal Reference
Please provide the name, address and telephone number of one personal reference.

Person to Notify in Case of Emergency

Name: __________________________
Address: __________________________
City / ZIP: __________________________
Home Phone: ______________________  Cell/Work Phone: ______________________

Volunteers 18 years of age and older:

Signature: __________________________  Date: ___/___/___

Volunteers 12 through 17 years of age:

I verify that I am a parent or guardian of the participant and consent to his/her participation in Reading Public Library volunteer program.

Parent Signature: __________________________  Date: ___/___/___
Student Signature: __________________________  Date: ___/___/___

LIBRARY USE ONLY

Application Received ____________

Interview (Date/Name) __________________________
Orientation ________  Training _________________

☐ Database  ☐ Name Badge  ☐ CORI  ☐ Notes: