



### 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's volunteer program.

Parent Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

### LIBRARY USE ONLY

Application Received: \_\_\_\_\_

Interview (Date/Name): \_\_\_\_\_

Orientation: \_\_\_\_\_ Training: \_\_\_\_\_

Database  Name Badge  CORI  Notes: \_\_\_\_\_