

Date received _____

the Peter White Public Library
217 N. Front St. • Marquette, MI 49855 • (906) 228-9510
www.pwpl.info



Volunteer Application

Personal Information

Name: _____

Cell Phone: _____

Address: _____

E-mail Address: _____

City: _____

Gender: Female Male

Home Phone: _____

Emergency Contact: _____

Work Phone: _____

Emergency Contact Phone: _____

Employment Status: Employed Retired Homemaker Student Not employed

Current Employer and Position: _____

Volunteer Experience: _____

Interests and Skills: _____

Highest Level of Education: H.S. Vocational/Tech College Degree Other

Please indicate any physical disabilities or accommodations you may require while volunteering:

Volunteer Service Interests (select one or more)

Shelf Straightening
Placing items in correct order
and make shelves look neat

Simple Mending
Mending, cleaning, and
labeling of materials

Garden/Houseplant Maintenance

Clerical Support for Administration

Local History/ Genealogy

Special Events
(book sales, programs, etc.)

Library Links Trainer

Other _____

The Library does not always have volunteer opportunities available for each area.

Date received _____

Your Availability

	Morning	Afternoon	Evening
Sunday (September - May)			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

How long do you plan to serve as a volunteer?: _____

References

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Have you ever volunteered before?: _____ If so, where?: _____

How did you hear about volunteer opportunities at the library?: _____

Signatures

I certify that the statements in this application are true and correct. I understand that information submitted on this form may be disclosed to any party with legal and proper interest, and I release the Library from any liability whatsoever for supplying such information. I grant the library permission to obtain information from references that I have provided.

I understand that as a volunteer I will not be paid for my services. I understand that volunteers who are interested in paid employment at the Library must apply and compete with all other applicants. I understand that I will not be covered by Worker's Compensation. I do hereby agree to indemnify and hold harmless the Peter White Public Library and the City of Marquette from any and all claims or causes of action that may arise out of performance of my assigned duties.

I understand that it is the policy of the Peter White Public Library to protect the privacy of those who use the Library. I agree to hold all information about patrons in complete confidence. In addition, I understand that a breach of confidentiality is grounds for dismissal from the Library's volunteer program.

Applicant Signature: _____ Date: _____

Parent Signature (if age 11-18) _____ Date: _____