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62 Chestnut Street, Oneonta, NY 13820 607.432.1980

**Library Volunteer Application Form**

Date -

Name \_\_\_\_\_

Street \_\_\_\_\_

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

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Age (if under 18) \_\_\_\_\_

Previous Work, Volunteer, or Computer Experience

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

How many hours do you wish to work each week? \_\_\_\_\_

Which days? \_\_\_\_\_

What types of work are you interested in doing at the library?

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

Emergency contact \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Have you ever been convicted, pleaded guilty or no contest to a misdemeanor or felony?

Yes \_\_\_\_\_ No \_\_\_\_\_

Please explain:

I certify that the statements made in this volunteer application are true and correct, and have been given voluntarily. I understand that this information may be disclosed to any party with legal and proper interest, and I release Huntington Memorial Library from any liability for supplying such information.

I understand that Huntington Memorial Library reserves the right to screen volunteers, to accept or reject any applications, and to place applicants in specific locations and positions based on the needs of the Library.

I understand that I will not be paid for my services as a volunteer and I am giving my time freely to the Library.

I understand that my volunteer service may end at any time for any reason with or without cause and with or without notice.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Required if the applicant is under age 18.)