Welcome!

Volunteer Application

Contact Information

Name:		
Address:	City:	State:
	Zip:	
Phone #1:	Phone #2:	
Email:		
Emergency Contact Name:	Emergency Contact Phone:	

Availability, Skills and Interests

Please indicate the days you are available:

❑Monday ❑Tuesday ❑Wednesday ❑Thursday ❑Friday ❑Saturday ❑Sunday

Time of day: ❑Morning ❑Afternoon ❑Evening	Number of hours per week you are available to volunteer:

Frequency:

❑Every week ❑Every other week ❑For Special Projects Only

I prefer:

❑Volunteer work I can do in the Library building
❑Volunteer work I can do from home

Special Skills or Interests: *We will try our best to match interests and times with tasks but cannot guarantee it – thank you!*

Languages you speak, read or write, in addition to English:

References

Please list the names and phone numbers of three references we may contact:

Name:	Phone:
Name:	Phone:
Name:	Phone:

Thank you for your interest in Mahopac Public Library!
668 Route Six Mahopac, NY 10541 ⬩ Phone: 845/628.2009 ⬩ Fax: 845/628.0672
www.mahopaclibrary.org

Over →

<table>
<tr><td rowspan="5">Personal Information</td><td>Applicant Name</td></tr>
<tr><td>Are you willing to submit to a criminal background check if required? ☐Yes   ☐No</td></tr>
<tr><td>Do you have any physical or medical limitations? ☐Yes   ☐No
If yes, please describe:</td></tr>
<tr><td>I understand that my volunteer work is a commitment upon which the Library relies. When I cannot work at the assigned time, I will notify the Library as soon as possible. If I decide to stop volunteering, I will notify the Volunteer Coordinator. In addition, I have read, understand and agree to Mahopac Public Library's Policies.

Volunteer Signature: Date:</td></tr>
</table>

<table>
<tr><td rowspan="7">For Library Use Only</td><td>Receipt of Application Acknowledged (within one week)
Date: By: ☐email ☐phone</td></tr>
<tr><td>References Checked
Person Contacted: Results:

Person Contacted: Results:

Person Contacted: Results:</td></tr>
<tr><td>Interview
Date: By:

Comments:</td></tr>
<tr><td>Assignment
Supervisor: _____

Day/Time: _____

Duty: _____</td></tr>
<tr><td>Handbook Received
Date:</td></tr>
<tr><td>Confidentiality Agreement Signed
Date:</td></tr>
</table>

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