Clymer Library
Volunteer Application

Name: _____

Are you under the age of 18? _____ Yes _____ No

Local Address: _____
Street Town State Zip

Telephone: _____ E-mail: _____

Have you previously worked in a library?? _____ Yes _____ No

If yes, in what capacity? _____ Paid Staff _____ Volunteer

Please check areas below in which you have experience or interest:

_____ Checking In/Out Books _____ Shelving Books

_____ Help with Story Hour _____ Shelf Reading

_____ Technical Tasks _____ Telephone Work

_____ Clerical Work (Typing, Filing) _____ Help People Find Books

_____ Work with Computers _____ Work with the Internet

Have you previously volunteered at Clymer Library? _____ Yes _____ No

Availability: (Please circle any shifts you may be available to work)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10am-1pm	10am-1pm	10am-1pm	10am-1pm	10am-1pm	10am-1pm
1pm-3pm	1pm-4pm	1pm-3pm	1pm-4pm	1pm-4pm	1pm-3pm
3pm-5pm	4pm-8pm	3pm-5pm	4pm-8pm	3pm-5p	3pm-5pm

Would you be available to substitute on other shifts on short notice? _____ Yes _____ No

Seasonal Availability: (Please circle the months during which you could volunteer)

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec