Forbes Library Volunteer Application

Please complete this form to be considered for a volunteer position. You will be contacted by a staff member when a potential opportunity becomes available. Following a brief interview with one of the library's professional staff, approved volunteers are matched with appropriate projects for a specified length of time.

Date			
First Name	I	Last Name	
Address			
Date of Birth: Day	Month	Year	
Phone Number			
Email			
_			
Emergency Contact			
Name			
Phone			
D 4 (1			
Reference (please not yo		,	
Phone			_
Relationship to you			_
What days and times are	you available durin	ng the week to volunteer?	
How often do you want t	to volunteer? (circle))	
weekly mu	ltiple times per wee	ek monthly	
year round	l summer	rs only	
Work Experience			
Last or present position			
Employer, City and State	2		
Education (check highest	level)		
☐ Elementary	☐ High School	☐ Technical School	☐ Some College
☐ College degree or pro	ofessional training i	n	

Please	check off the potential tasks that interest you:
	Book shelving/ shelf maintenance
	Gardening/ yard work
	Teaching / facilitating a library program (please specify)
	Fundraising
	Cleaning/maintenance
	Clerical work
	Assist patrons in using computers
	Storytelling/working with kids
	Greet and direct patrons
	Working with Special Collections/Archives
	Communications/design work
	Book mending
	Volunteering with the Friends of Forbes Library
	Other (please specify)
Other	interests, hobbies and skills (include knowledge of languages):
library anothe	keep in mind that not all types of volunteer opportunities are available all of the time. If the is unable to utilize your volunteer service at this time, are you interested in being referred to er local agency? Yes No
If cou	rt ordered community service – number of hours and date must be completed by:
Offens	note all prospective volunteers for the Forbes Library may be asked to submit a Criminal se (C.O.R.I) Records Investigation as required by state law. Applicants under the age of 18 must ave signed permission from their parent or legal guardian.
I certii knowl	fy that the answers contained in this application are true and complete to the best of my edge.
Signat	ureParent/Guardian

Please complete this application clearly and return it to the library or mail it to Assistant Director, Volunteer Coordinator, Forbes Library, 20 West Street, Northampton, MA 01060. For questions call 413-587-1017.