

VOLUNTEER APPLICATION Corvallis – Benton County Public Library (For Applicants 18 and older)

Yes, I would like to be a library volunteer!	Date:
I WOULD LIKE TO VOLUNTEER AT THE FOLLOWING LIBRARY LOCATION(S) (Check all that apply): ☐ Corvallis Public Library ☐ Monroe Community Library ☐ Philomath Community Library	
Name:	_ Email:
Address:	City/St/Zip:
Preferred Phone:	Second Phone:
Date of Birth:/ (year of birth is not needed Month / Day	d) Age: 18 - 20 21 or older (Note: If you are 14 to 17 years old, please fill out a STUDENT VOLUNTEER APPLICATION.)
EDUCATION Last grade or degree completed:	
□ I am currently in school:	
(Please indicate which EMPLOYMENT I am not employed I am retired I am	n school, college, or university you are attending) n employed/self-employed I am job-hunting
VOLUNTEER EXPERIENCE I have never volunteered I have volunteer experience (please describe):	
SPECIAL INTERESTS List hobbies, interests, activities, clubs, special skills, or languages spoken:	
Have you ever been convicted of a crime? (Do not include any expunged juvenile record.) Yes No If yes, please explain*:	
*Criminal convictions do not necessarily disqualify you from volunteering at the Library, but will be considered in relation to specific positions.	
EMERGENCY CONTACT INFORMATION (REQUIRED):	
Name	Relationship:
Phone(s):	

VOLUNTEER POSITIONS I AM INTERESTED IN (Check all that apply; not all will be available): Visit our website to learn more about each volunteer job: http://cbcpubliclibrary.net. (Click on **Volunteer** under the **ABOUT** tab.) ☐ Adopt-A-Shelf ☐ Teen Programs & Events ☐ Pick Ups ☐ Check-In ☐ Collection Care / Book ☐ Other: ☐ Holds Search Display Assistant ☐ New Book/Holds Shelving ☐ Children's Programs & Events ☐ Public Computer Care **SCHEDULE:** When you are available to volunteer? (Between the hours of 8:00 am and 8:00 pm, M-Th.) Monday **Tuesday** Thursday Friday Saturday Day Sunday Wednesday 1:00 - 5:00 pm **Times** only you are available volunteer Close at 6 pm Close at 6 pm HOW DID YOU HEAR ABOUT OUR VOLUNTEER PROGRAM? Friends/Relatives Visiting the Library City of Corvallis website Library Website Other website: _____ Other, please list: _ **PHOTO RELEASE-** Please choose one: I give permission to publish my photo in printed library materials, websites, newsletters, and marketing publications in association with the Corvallis-Benton County Public Library. I DO NOT give the Corvallis-Benton County Public Library permission to publish my photo for any reason. I hereby certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I agree and understand that any misstatements or material omissions on the application will result in my being eliminated from further consideration. I understand that, if accepted, any misrepresentation or material omission, which becomes known to the Corvallis-Benton County Public Library, may result in my immediate dismissal. I agree that I will work within my assigned areas of responsibility without any monetary compensation, and be subject to workers' compensation coverage while on the job. I will follow the lawful directions of my assigned supervisor while working for Corvallis-Benton County Public Library and will follow and be bound by the Policies & Procedures of the City of Corvallis to the same extent as paid employees of the City, except Policies & Procedures relating to compensation and benefits, which do not apply to me. Signature: Date:

Please print and sign this completed application and drop off at any public service desk at the Main or Branch Libraries.

Or, Mail to: Corvallis-Benton County Public Library Attn: Volunteer Coordinator 645 NW Monroe Avenue Corvallis, OR 97330