## VOLUNTEER APPLICATION



Please note: you must be 16 or older to volunteer with the Library.

## Personal Information

Name:	Date:						
Address:			City:		State:	Zip:	
Telephone:	Cell/Work te	lephone:		Email:			
What is the best way to r	each you during t	the day?					
Date of birth (adults, plea	ase list month & d	lay only):	Age:	<b>○16-17</b>	○18-30	○31-54	○55+
Are you a student?	Yes No	Employed?	Yes No				
Emergency contact nam	e:						
Relationship:		_Contact tel	ephone:				
Do you have a communi	ty service require	ment? Y	es No Sch	nool O	Work $\bigcirc$	Court	Other
If yes, how many hours a	re you looking fo	r and by wh	at date?				
Skills, Experien	.ce, and Int	erests					
Current or most recent e	mployer (if applic	cable):				OP/	T OF/T
Dates of employment:		_ Job title:					
Job responsibilities:							
May we contact for a ref	erence? Yes	No Co	ontact name and t	elephone:			
Please tell us about your	prior volunteer e	xperience (i	f applicable):				
Organization name:		_ Your respo	nsibilities:				
May we contact for a ref	erence? Yes	No Co	ontact name and t	elephone:_			
Organization name:		_ Your respo	nsibilities:				
May we contact for a ref	erence? Yes	No Co	ontact name and t	elephone:_			
Please list hobbies, intere	ests, special skills	(including fo	oreign language sk	kills), and e	xperience y	ou can off	er:

## **Availability** What days are you available to volunteer? (Check as many as apply.) \_\_\_ Tuesdays \_\_\_ Wednesdays \_\_\_ Thursdays \_\_\_ Fridays \_\_\_ Saturdays \_\_\_ Sundays Mondays Evenings What time during the day are you available? Mornings Afternoons Varies How often can you volunteer? 2 or more per week Once per week Once or twice per month Summer only Special events only At which locations would you prefer to volunteer? (Check as many as apply.) \_\_\_ Five Forks Branch Hughes Main Library Pelham Road Branch Anderson Road Branch Fountain Inn Branch Simpsonville Branch \_\_\_ Augusta Road Branch Greer Branch \_\_\_ Taylors Branch Mauldin Branch Travelers Rest Branch Berea Branch Blue Ridge Branch Which volunteer areas interest you? (Check all that apply.) \_\_\_ Shelving/Library aide Preparing packets for Seed Library \_\_\_ Transporting books in my vehicle \_\_\_ Friends gift shop \_\_\_\_ Assisting with adult programs Sorting donations \_\_\_\_ Assisting with children's programs \_\_\_ Transcribing Historical Documents \_\_\_ Special events \_\_\_ Helping with book sales \_\_\_\_ Assist with research in South Carolina Room \_\_\_\_ Bilingual services Any other comments: I understand that the Greenville County Library System conducts criminal records checks and sex abuse registry checks on volunteers who work in certain positions, and I hereby give consent for such a check if required for the volunteer assignment for which I'm being considered. Criminal record checks require a full date of birth, which I agree to provide upon request. I understand all such reports will be held in strictest confidence and that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of the background investigation. I understand that this is an application for and not a commitment or promise of a volunteer assignment. I understand and agree that the Greenville County Library System is under no obligation to consider me for full-time or parttime employment opportunities. Applicant Signature: Parent's Signature (if applicant is a minor): Please return to any branch/service desk or mail to: Amy Pecht - Volunteer Coordinator 25 Heritage Green Place, Greenville, SC 29601

apecht@greenvillelibrary.org

Fax 235-8375

Phone 527-9286