Willow Springs Public Library
Adult Volunteer Application (Age 18+)

Name _____
(Last) (First) (M.I.)

Address _____

City _____ State/Zip _____ Phone _____

Date of Birth _____ Social Security # _____

Emergency Contact _____
(Name) (Phone) (Relationship)

Highest Level of Education _____ Specialized Skills _____

General Interests & Hobbies _____

List any physical limitations you have that we should consider when matching you with volunteer jobs _____

Please check area(s) in which you are interested

( ) Preschool Story Time
( ) Clerical
( ) Basic I.T. Work
( ) Ground Care
( ) Collection Assistance
( ) General Cleaning
( ) Special Assignments
( ) Building Maintenance

Days and Times Available _____

Why would you like to volunteer? _____

_____

Previous volunteer experience(s) _____

_____

Are you willing to submit to a background check? Yes_____ No_____

Signature _____ Date _____

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.