



Volunteer Application

4015 Dickey Rd
 Gibsonia, PA 15044
 724-449-2665
 northerntierlibrary.org

Name (Mr., Mrs., Ms.)	
Street Address	
City, State, Zip	
Home Phone	Cell Phone
E-Mail Address	Birth Date (optional)
Best way to contact me	Best time to contact me
Emergency Contact	Emergency Phone

Currently Employed
 Currently Not Employed
 Retired

Employed By _____ Occupation _____

Education (*circle highest*) High School: 9 10 11 12 Some College College Degree Advanced Degree

How did you hear about volunteering at the library? _____

Have you ever volunteered at a library? If yes, where? _____

Do you have other volunteer experience? If yes, please describe:

Is this for required community service? If yes, why? _____

Will you need written verification for community service? If yes, when? _____

What is your availability?

Day	Time
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
On-Call	

Please list any skill, special training, degrees, work experience, or interests that you have that may contribute to your volunteer efforts (for example: foreign language, musical and artistic skills, calligraphy, etc.)

As a volunteer I agree:

To regard my assignment as a serious commitment, respect confidentiality and abide by the policies of the Northern Tier Regional Library. I also agree to maintain communication with the supervisor regarding my assignment and request clarification when necessary.

Volunteer's Signature

Date