



ADULT VOLUNTEER APPLICATION

Thank you for your interest in volunteering at the Griffin-Spalding County Library

This application, required for all volunteers, can be accepted at the front desk of the Library, by fax, or by mail.
 For more information, please call the library at (770)412-4770.

I. Personal Information

Date _____

Name _____
Last First Middle Date of Birth

Address _____
Street City State Zip

Telephone _____ Telephone _____
Home Parent/Guardian

Email Address _____

How do you prefer to be contacted about volunteering? () Email () Phone

II. Employment Information

Are you currently employed? _____ If so, where? _____

Position/Title _____ Describe your duties _____

Other employment experience (briefly describe) _____

III. Education Information

High School: Diploma GED

Are you currently attending school? _____ Where? _____

Circle highest level of education completed: 1 2 3 4 5 6 7 8 9 10 11 12

Please list all degrees _____
Under Graduate Post-Graduate Doctorate

IV. Volunteer Information

Have you ever volunteered before? _____ If so, where? _____

Brief description of duties? _____

How did you hear about the Library's volunteer program? _____

Please note the skills, abilities, or interests below that are applicable to you:

- Previous library work
- Data processing/computer work
- Typing/word processing
- Storytelling
- Knowledge of foreign language(s) ~ Please list: _____
- Knowledge of audio-visual equipment
- Arts and crafts experience
- Knowledge of/work with historical materials
- Experience with electronic resources

Other special interests, skills, and/or hobbies _____

Do you **currently** volunteer for any other organizations? Which ones? _____

Physical limitations? (List) _____

V. Schedule Information

I AM AVAILABLE FOR VOLUNTEER SERVICE:
(Check all times that apply)

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|------------------------|--------|---------|-----------|----------|--------|----------|
| Morning (9am-1pm) | | | | | | |
| Afternoon (1pm-5pm) | | | | | | |
| Evening (5pm-9pm) | | | | | | |

The Griffin-Spalding County Library is closed on Sundays and State holidays.

VI. Background Information

Have you ever been convicted of a felony or misdemeanor other than minor traffic violations?

Yes No If so, please list _____

Personal Reference _____ Relationship _____

Telephone _____

Professional Reference _____ Relationship _____

Telephone _____
Home
Business
Mobile or Other

VII. Emergency Contact Information

Person(s) to contact in case of emergency _____

Telephone _____
Home Business Mobile or Other

I, _____, do hereby agree to indemnify and hold harmless the Griffin-Spalding County Library ("Library") from any and all claims or causes of action that may arise out of performance of my assigned duties. I waive any right of action I have against the Library in consideration of my participation as a volunteer for the Library.

I also understand that in my capacity as a Library volunteer, I may come into contact with confidential information. I agree to protect this information to the best of my abilities as a volunteer and not to divulge it during or after my service as a volunteer has ended.

Printed Name _____ Date _____

Signature _____

FOR VOLUNTEER OFFICE USE ONLY:

- Badge
- Volunteer Timesheets
- Lunch/Breaks
- Statement of Policies
- Youth Volunteer Guidelines
- Dress Code
- Supervisor Contact Information
- Schedule/Punctuality
- Acknowledgment Form

| | | |
|----------------------|-------------------------|-------------------------------|
| <i>Date Entered</i> | <i>Category</i> | <i>Start Date</i> |
| <i>Inactive Date</i> | <i>Resignation Date</i> | <i>Reason for Resignation</i> |
| <i>Release Date</i> | | <i>Reason for Release</i> |