

## **Application for Adult Volunteers**

Thank you for your interest in volunteering for the Urbandale Public Library. All applicants must be at least 18 years of age and complete a confidential background check release.

Applicant Infor	mation:						
Last Name	First Name_						
Address			City		State Zip		
Phone			Ema	il			
What is the best way to contact you?			May we text you at the above			?	□ NO
Date of birth:							
Applicant Signa	ture		Date				
Do you know an	yone who curre	ntly works or vol	unteers at the Lit	orary? If	so, who?		
Emergency Co	ntact Information	on:					
	First Name_						
	Phone_						
Availability:							
			l				
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Please list times							
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Are you interested in intermittent volunteer work? (check one):							
Why do you wa	ant to volunteer	at the Urbanda	ale Public Librai	y?			
Do you have ar	ny previous vol	unteer or work	experience? If	so, please desc	cribe:		
Do you have ar	ny skills or hob	bies that might	be of particular	benefit to the	library? Please	ist:	
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- Ry chook	ing this boy I off	irm that have re	ad the Volunteer	Handbook that	explains the role	and reconcibilit	ies of LIDI
					explains the role cummings@urban		ICS UI UFL