



Volunteer Application

Volunteer openings may vary based on the needs of the Library. Submitting an application does not guarantee placement as a volunteer. *(Volunteers must be 14 or older)*

Name: _____ Date: _____

Address: _____

City, State, Zip: _____

Phone (Cell): _____ Phone (Home): _____

Email: _____ Age *(if under 18)*: _____

Parent/Guardian Signature *(If under 18 years of age)* _____

Email: _____ Phone: _____

Person to notify in case of emergency: _____ Phone: _____

I am seeking this volunteer position to:

- ☐ Become a regular volunteer
- ☐ Satisfy school requirement
- ☐ Other: _____

Will you require the Library to provide documentation of your volunteer service: YES NO

If so, to whom? _____

Date you need to have all hours completed: _____

Number of hours needed: _____

Library Hours: Monday-Thursday: 10am – 8pm; Friday-Saturday: 10am – 5pm

During which hours are you available? Note: Most positions call for 2-hour shifts. (Check all that apply)

Monday 10am-12 12-3pm 3-6pm 6-8pm	Thursday 10am-12 12-3pm 3-6pm 6-8pm
Tuesday 10am-12 12-3pm 3-6pm 6-8pm	Friday 10am-12 12-3pm 3-5pm
Wednesday 10am-12 12-3pm 3-6pm 6-8pm	Saturday 10am-12 12-3pm 3-5pm

Date you can start: _____

To help us match you with the best volunteer experience please mark the tasks you are interested in.

	Youth Program prep/assistance		Used Book Sales (Friends of the Library)
	Adult Program prep/assistance		Donated Book Sorter (Friends of the Library)
	Youth/Teen special events		Landscaping Assistance
	Adult special events		

How did you hear about our volunteer program? _____

Applicant's Signature: _____ Date: _____

☐

Please keep me up to date on the latest news and programs the Library has to offer!

Your information will not be used for any other purpose than Library communication

Thank you for your interest in volunteering with the White Lake Township Library. Your time completing this application is greatly appreciated. Applications can be emailed, mailed, or delivered in person to the Administration office. Our Administrative Assistant will contact you soon!

Email: hclark@whitelakelibrary.org

Mailed to: **Administrative Assistant**
White Lake Township Library
11005 Elizabeth Lake Road
White Lake, MI 48386

Office Use Only:

Date Received: _____ Date Contacted: _____ Phone/Email

Comments: _____

Start Date: _____