



Volunteer Application

Downtown Bethel Sheldon

**Public
Library**

Date _____

Thank you for your interest in volunteering at your Library!

Hundreds of **long-term, weekly** volunteers support Library staff. Each volunteer commits to a specific task for the same day and time each week. Most shifts are 2 hours weekly. Most volunteers serve at least 1 year; a minimum 6-month commitment is required. The minimum age is 14.

If this seems like a good match for your interests and schedule, please complete and return this form. When we have openings related to your skills, we will contact you.

***If you are looking for short-term or immediate volunteering:** Please contact United Way, which matches volunteers with opportunities in the community. Call 541-741-6000 for more information.*

Please print:

Name _____

E-mail _____

Phone (home) _____ Phone (work) _____

Phone (cell) _____

Mailing address _____

City _____ ZIP _____

Your preferred personal pronouns: He/Him She/Her They/Their Other: _____

Emergency contact person _____

Phone(s) _____

Please list contact information for 2 people who have supervised your work (paid or volunteer) or your participation in school or a community organization:

1) Name _____ Position _____

Company/school/organization _____

Phone _____ E-mail _____

2) Name _____ Position _____

Company/school/organization _____

Phone _____ E-mail _____

(over)

Have you ever been convicted of a criminal act? yes no

If yes, please explain _____

If you are currently employed:

Job _____ Company/school/organization _____

Supervisor's name _____ Phone _____

City _____ State _____

If you are currently a student, specify what grade/level: _____

If you are volunteering as part of a community service or other program, name the school or program:

How many hours are required? _____ By what date? _____

Contact person at school/program _____ Phone _____

If you are under 18 years old, what is your date of birth? _____

Required for those under 18: parent/guardian's signature to indicate permission to volunteer at the Library:

_____ *print name*

_____ *signature*

_____ *date*

Please check the volunteer areas that interest you:

Keeping books and other items in order in the public areas of the Library

Helping visitors at the Information Desk

Bookstore clerk

Preparing and/or repairing Library items

Clerical assistance (computer)

Assistant for teen events

Other _____

The following tasks require background checks:

Assistant for children's events

Leading storytimes at daycares

Maker Hub Open Labs

Tell us about your relevant paid or volunteer experience or skills. (If you are fluent in a language in addition to English, please let us know.)

Why would you like to volunteer at the Library? _____

Thank you for your support!

Eugene Public Library Volunteer Program

ahartsfield@eugene-or.gov

541-682-8335