



Volunteer Application

Print please!

Date: _____

Name: _____
Last First Middle

Street Address: _____

Mailing Address (if different): _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

***EMERGENCY CONTACT INFORMATION**

Name: _____ Phone: _____

1. What types of volunteer work are you interested in?

- | | |
|---|---|
| <input type="checkbox"/> Shelving books & materials | <input type="checkbox"/> Helping with programs |
| <input type="checkbox"/> Cleaning books & shelves | <input type="checkbox"/> Outreach deliveries to seniors |
| <input type="checkbox"/> Grounds work | <input type="checkbox"/> Friends of the Fletcher Free Library |
| <input type="checkbox"/> Computer work / Lab monitor | <input type="checkbox"/> Teaching ESL / language classes |
| <input type="checkbox"/> Preparing materials for the collection | <input type="checkbox"/> Other: |

2. At what times are you interested in volunteering?

The library is open Mon., Thu., Fri. & Sat. 10 am-6 pm; Tue. & Wed. 10 am-8 pm; Sun. Noon-6 pm.

3. Skills and interests

Education background:	
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Current Occupation:	
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Hobbies, interests, skills:	
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Volunteer experience:	
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4. Have you ever been convicted, imprisoned, placed on probation, or fined for any violation of any law or ordinance (not including parking violations)?

Yes No

If YES, please explain: _____

5. Do you have any medical condition that should be considered in assigning you specific work?

Yes No

If YES, please explain: _____

6. List name and phone numbers of two references.

Name: _____ Phone: _____

Relationship: Employer Family Friend

Name: _____ Phone: _____

Relationship: Employer Family Friend

**Please return this form
to a
Library staff member
or
through the mail:**

*Fletcher Free Library
Circulation
Department
235 College Street
Burlington, VT 05401*

Thank you for your interest in volunteering.
A Library staff member will contact you shortly
regarding your application!