Volunteer Application

Contact Information

| Name | | | |
|---|---|---------------------------|--------------------------------------|
| Address | | | |
| Home Phone | | Cell Phone | |
| Email Address | | | |
| Availability How long do you wis | h to volunteer? Specify # | of Hours | Ongoing |
| When are you availal | ble for volunteer assignments? | | |
| Monday | Thurs | day | Mornings |
| Tuesday | Frida | Y | Afternoons |
| Wednesday | Satu | rday | Evenings |
| Interests | | | |
| Tell us in which areas y | ou are interested in volunteering (ple | ease mark all areas of ir | nterest). |
| New material proc | essing Mending booksP | ulling Weeds So | orting donated books Cleaning |
| Book reviewer | Shelf reading Computer | tutorAssist w sun | nmer readingAssist story time |
| Cleaning Work where needed Other | | | |
| | cations: Summarize special skills and bugh other activities, including hobbid | | e acquired from employment, previous |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| REFERENCES (Not | related to you) | | |
| | · | Address | |
| Ph # | | Years Known | |
| Name | | Address | |
| | | | |