

Student Volunteer Application

Thank you for applying to volunteer at the Buchanan District Library!

Please complete both sides of this form and return to the library, email, or mail to:

Buchanan District Library, 128 E. Front St., Buchanan, MI 49107

m.paulette@buchananlibrary.com



PLEASE PRINT:

Name _____ Date _____

Address _____

City _____ ST _____ ZIP _____

Phone: _____ Email: _____

Emergency Contact Person: _____ Relationship _____

Emergency Contact Telephone number: _____

Applicant:

I am *under* 18 years of age I am 18 years of age or over Grade: _____

My availability is (circle all that apply): Monday Tuesday Wednesday Thursday Friday

Times available: _____

- I am volunteering my time and understand that I will not be paid for my services as a volunteer and expect no compensation.

Applicant's Signature: _____ Date _____

Parent/Guardian:

My child has my permission to serve as a volunteer at the Buchanan District Library. I understand that they will participate on an occasional basis for special events, projects, or library functions.

Parent/Guardian's signature: _____ Date _____

(Required if applicant is under 18 years of age)

Name: _____

Volunteer Interest Indicator

YES

NO

Prepare for programs/events (ex: cut out materials for a craft)

Library grounds help (ex: weeding, sweeping)

Create book displays

Special Events (possible weekends)

Some other general duties include: shelve books, dust books shelves, clean material, clerical tasks

What would you like to learn as a volunteer at the library?

Do you have any special skills or talents you would be willing to use as a volunteer?

Please describe your skill/comfort level with computers and other technology: