

Bradley Public Library District Volunteer Application

Name	
Address	
Home Phone	
Cell Phone	
Email	
Age	<input type="checkbox"/> Minor (under age 18, Age: ____) <input type="checkbox"/> Adult (18+)

Why do you want to volunteer at the library?

Are you volunteering to fulfill a requirement?

School / Church Court ordered community service Other _____

Number of required hours and deadline for completion: _____

Time Commitment/Frequency

Temporary (less than 6 months)
 Regular weekly schedule
 Sporadically/ Events only

Hours per Week

1-2 hours per week
 3-4 hours per week
 more _____

Availability

Day	Hours
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

Previous volunteer experience

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Special Skills or Qualifications

Summarize skills and qualifications you have acquired from employment, volunteer work, school, or other activities including hobbies. Please include computer and language skills.

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References (please provide two)

Name	
Address	
Phone	
Relationship to you	
Name	
Address	
Phone	
Relationship to you	

I certify that the information provided on this application is true to the best of my knowledge. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I agree to indemnify, hold harmless, and release the Bradley Public Library District, its officials, and employees from any liability for property damage and/or personal injury to me or my child/ward resulting in his/her participation as a volunteer.

Signature: _____ Date: _____

If under 18, a parent/guardian must also sign.

I give my permission for my child to volunteer at the Bradley Public Library. I acknowledge that any photograph or video taken of my child/ward participating in a volunteer activity may be used for outreach, education, or documentation purposes by the Bradley Public Library.

Signature: _____ Date: _____

Please return to: Bradley Public Library, 296 N. Fulton Ave, Bradley IL 60915