

Mercer Area Library 110 E. Venango Street Mercer, PA 16137 (724) 662-4233 www.mercerarealibrary.org

Volunteer Application Form

Personal Information

| Name | | | | |
|-----------------------------|---------------|------------------------------|-----------------|--|
| E-Mail Address | | | | |
| | | (Cell) | | |
| Address | | | | |
| City | State | Zip Cod | e | |
| In case of emergency, notif | y (Name): | | | |
| Telephone: | Relationship: | | | |
| Clearance | | ees Checklist Date Obtained | Expiration Date | |
| · | • | | | |
| | | | | |
| 3 | | | | |
| | Child Abuse R | eporting Training | | |
| | ng Completed | | r Signature | |



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I would be interested in assisting with (check volunteer assignments listed below):

Circulation Desk

Shelf Reading

___ Shelving

| | Housekeeping | | | | |
|---|--------------------|------------|----------|--|--|
| | Movie Nights | | | | |
| | Special Projects | | | | |
| Computer Assistance | | | | | |
| | Outdoor Activities | | | | |
| Please indicate your availability in the chart below: | | | | | |
| Days | Mornings | Afternoons | Evenings | | |
| Tuesday | | | | | |
| Wednesday | | | | | |
| | 1 | | | | |
| Thursday | | | | | |
| Thursday Friday | | | | | |



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OCCUPATION AND/OR EDUCATION

| Current and /or form | er Occup | oation | | | | _ |
|-----------------------|------------|---------------|----------|----------------|---|-----|
| Employer | | | | | | |
| Are you a student? | Yes | No | | | | |
| If yes, which school | do you a | ttend? | | | | _ |
| | | | SKILL | S. | | |
| Do you know how to | use a co | omputer? | Yes | No | | |
| Are you familiar with | 1: | Internet | Word | l Microsoft | Excel | |
| What language(s) oth | ner than I | English do yo | ou speak | and/or write w | ith fluency | |
| volunteer assignment | t? | | | | o match you with the bo | est |
| | | | | | | |
| | | REFEREN | NCE INF | ORMATION | | |
| Please provide a refe | rence _ | | | | | |
| Phone | | | | | | |
| Applicant Signature | | | | Date | | _ |
| | olunteer a | at the Mercer | | • | I give permission for the imum of hours | |
| If you need to reach | me, my p | phone numbe | er is | | | - |
| Parent/Guardian Sign | nature | | | | Date | |