

# East Greenbush Community Library Volunteer Application

## Contact Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Method of Contact: \_\_\_\_\_

## Availability

What hours are you available for volunteer assignments? How often?

MON \_\_\_\_\_ Each week for \_\_\_\_\_ hours

TUES \_\_\_\_\_ Seasonal (Summer, Holidays, etc.)

WED \_\_\_\_\_

THURS \_\_\_\_\_ Special Projects \_\_\_\_\_

FRI \_\_\_\_\_

SAT \_\_\_\_\_

SUN \_\_\_\_\_

## Library Interests

The Library needs volunteers for the following areas. Please mark any that you would be interested in:

Shelving \_\_\_\_\_ Collection Maintenance \_\_\_\_\_ Teaching Classes \_\_\_\_\_

Displays \_\_\_\_\_ Circulation Desk \_\_\_\_\_ Crafts/Craft Preparation \_\_\_\_\_

Program Assistance \_\_\_\_\_ Computer Class Assistant \_\_\_\_\_

Program Leader \_\_\_\_\_ Website Quality Control \_\_\_\_\_

What is one thing you would do to improve the library?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Emergency Contact:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Reference

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

