

Camrose Public Library Volunteer Application

Full Name _____

Address _____

Address Line 2 _____

City _____

Postal Code _____

Preferred Phone Number _____ Home Cell Work

Email _____

Preferred Contact Method: Phone Email Text

Birthday (month & day only) _____

Emergency contact:
Name _____

Phone _____

If under 18 years of age:

Birth date: ____ / ____ / ____ (Day Month Year)

School: _____ Grade: _____

Previous Volunteer Experience:

Note: A personal resume outlining any additional information may be forwarded, but is not required.

Do you have any specific qualifications and/or experiences (for example: employment, previous volunteer work, hobbies, sports, etc.) that you feel would make you an asset to the library?

Interests/Hobbies

Other comments

During which hours are you available for volunteer opportunities?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Would you like to work (check all that apply):

- With others
- Independently
- Short term project
- A regular 1-2 hour weekly shift

What volunteer position are you interested in applying for?

- | | |
|--|--|
| <input type="checkbox"/> lifecycle pilot | <input type="checkbox"/> outreach delivery |
| <input type="checkbox"/> sewing instructor | <input type="checkbox"/> knitting/crochet instructor |
| <input type="checkbox"/> timeslips storyteller | <input type="checkbox"/> dungeon master for D&D |
| <input type="checkbox"/> snacks in the stacks | <input type="checkbox"/> poster delivery |
| <input type="checkbox"/> general cleaning | <input type="checkbox"/> photographer |
| <input type="checkbox"/> Fellowship of Camrose Public Library (Friends of the Library group) | |

I understand that I am required to submit a criminal record check and vulnerable persons check as part of the volunteer screening process. City of Camrose residents can have a check done with Camrose City Police and County of Camrose residents can go to the Camrose RCMP detachment. I understand that in the course of my work as a volunteer, I may have access to personal information about Library users, including their requests for information and records of materials they have borrowed. I agree to hold such information in complete confidence and to access it only in the course of performing my volunteer assignment.

By submitting this application, I affirm that the facts set forth in it are true and complete.

- I agree