Humboldt County Library
Volunteer Application

Name: _____

Address: _____ City _____ Zip _____

Phones - Home: _____ Work: _____ E-mail: _____

Briefly, why do you want to volunteer at the H.C. Library?

Do you have any special skills to offer? (Speak/read/write other languages? Computer skills? Graphics skills?)

What type of volunteer work do you wish to do? Are there any skills or aptitudes you wish to use as a volunteer?

Do you have any other volunteer experience? Have you ever worked in a library?

Please indicate the hours you would be available to volunteer. Please be specific. (TWF, 2-4 pm)

Time/Day	Tue	Wed	Thu	Fri	Sat
Morning					
Afternoon					
Evening					

I would like to volunteer

_____ hours/week

_____ hours/month

_____ other (describe)

In case of emergency, please notify the following individual:

Name:_____ Address _____ City_____

Relationship _____ Work Phone _____ Home Phone _____

I understand that there is no pay or other remuneration for my services as a volunteer and that I am not an employee of the Humboldt County Library. I agree to abide by the policies and procedures of the Library.

_____   _____
              Signature   Date