Neenah Public Library Volunteer Application

Today's date:		
What are your preferred gender pronouns?		ey/Them/Theirs
First Name:	Last Name:	Middle Initial:
Address:	City/Zip:	
Phone: <u>()</u>	Email:	
In case of emergency, contact:	Phone:	Relationship:
Preferred Contact Method: 🗆 Call 🛛 🗆 Er	mail 🛛 No Preference	
1. Availability		
□Monday □Tuesday □Wednes	sday 🛛 Thursday 🖓 Friday	□Saturday
Preferred:	ons DEvenings	
I would like to volunteer approximately	days or hours per week. I am availa	able to start on/after this date:
2. Are your volunteer hours required for	or class or school? 🛛 Yes 🗌 No	
If Yes, total hours needed:	Deadline for completion:	
What school do you attend?		
School contact person:	Phone:	
Please Note: You must notify the Volunteer	Coordinator if a written statement of c	ompleted hours worked will be needed
or if you have your own paperwork.		
3. Are your volunteer hours a requirem Court)? □ Yes □ No	ent to fulfill court-ordered commu	nity service (Including Teen
f yes, please state the nature of the offense	e:	
Total number of hours required:		
Please Note: You must notify the Volunteer	r Coordinator if a written statement of o	completed hours worked is needed for

a third party.

4. Please describe any work/volunteer experience or skills that you have.

5. References (forme	r employer, other volunteer exp	eriences, teacher, etc.)	
Name:	Email:	Phone:	Relationship:
Name:	Email:	Phone:	Relationship:
	(*required) h Public Library doing a criminal back son and without explanation.	ground check. I understand	that the Library may deny my
*Date of birth:			
*Signature of Voluntee	r Applicant:		_Date:

Volunteer Agreement and Release

I understand that my services are being offered on a voluntary basis without anticipation of financial remuneration. I shall indemnify and hold harmless the City of Neenah and the Neenah Public Library, its Board and officers, agents, and employees from and against all claims, demands, loss of liability of any kind or nature for any possible injury incurred during volunteer service.

Signature of Volunteer Applicant:	Date:
· · ·	
Signature of Parent/Guardian (if under 16): _	Date:

Library Use Only

Date received:	Screened:	NPD <u>:</u>
□ Approved	Orientation/start date:	
□ Denied	Date notified:	
Comments:		