GILFORD PUBLIC LIBRARY
VOLUNTEER APPLICATION FORM

Name_________________________________________ Date____________________

Address______________________________________ Phone____________________

Email:__________________________________________

Employed/ Name of Employer__________________________

Other (retired/student/homemaker, etc.)____________________

Parent or Guardian (if student) ________________________________

Parent’s Employer________________________________________

Volunteer Work Desired________________________________________

Is there anything you would like to share about yourself: work experience, education, hobbies, interests?
________________________________________________________________________

The library appreciates your interest in volunteering with us. We have many jobs using various skills and
will do our best to fit you with something you enjoy. Some things volunteers contribute:

• Covering new materials
• Cleaning materials as they come in
• Cutting out things for Children’s Room crafts
• Computer skills: deleting old materials, flyers, computer searching of materials, etc.
• Reading Shelves
• Library Album
• Shelving Materials

Please read the following agreement:
I hereby attest that my attendance and involvement in activities undertaken for the Gilford Public Library
are voluntary and that I am participating at my own risk. In addition I agree to keep confidential all patron
information or Library records as I may encounter. If qualified for voluntary service, I agree to abide by
the rules and regulations of the Library. I understand that I will be asked to volunteer as a need exists.
Regular times may be established.

Emergency Contact ___________________________________ Phone____________________

Signed____________________________________________________