



34 Main Street  
 Northborough, MA 01532  
 northboroughlibrary.org  
 508-393-5025

## Northborough Free Library Volunteer Application Form

Thank you for your interest in volunteering at the Northborough Free Library. Please complete this form and return it to the library. You may bring a printed version to the Reference Desk on the 2<sup>nd</sup> floor or email a digital copy to the Reference department at [noboadults@cwmar.org](mailto:noboadults@cwmar.org). Applicants in grades 8-12 must complete the application themselves, except for the last section, which must be completed by a parent or guardian.

Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

### Contact Information

Address	
Email	
Phone	

### Emergency Contact

Name & Relationship	
Email	
Phone	

### Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening (after 5pm)				<i>Closed</i>	<i>Closed</i>	<i>Closed</i>

How often do you want to volunteer? Please circle any that apply:

Year Round	Fall (Sept.-Nov.)	Winter (Dec.-Feb.)	Spring (March-May)	Summer (June-Aug)
Weekly	Bi-weekly	Monthly	Special Events	Other:



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**Area of interest for volunteering? Please circle any that apply:**

Children's Room      Teen Room      Adult/Reference Area      Library Courier      Book Sales      Library Events

**If you are over 18 years old:**

All prospective volunteers will be asked to submit a Criminal Offense Records Investigation (C.O.R.I.) check as required by state law (Chapter 6 Sec. 172C) and approved before the volunteer work can begin.

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

Signature: \_\_\_\_\_

**If you are under 18 years old:**

Applicants under the age of 18 must have their parent or guardian fill out the information below and sign.

Applicant's Name: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Phone & Email: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

**Staff Use Only (Y/N & initial):**

Children	Teen	Adult	Friends

Contacted by: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_