



Volunteer Application for Adults

If you are under 18 years of age please complete the Volunteer Application for Students.

Name _____ Date _____

Address _____

City _____ Zip _____

Phone 1 _____ Phone 2 _____

Email Address _____

Employment Status: ☐ Employed ☐ Retired ☐ Homemaker ☐ Student ☐ Unemployed

Current Employer and Position: _____

Employment History (past five years - attach resume if desired):

Employer or Organization	Position Title	Month & Year (To / From)
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_____	_____	_____
_____	_____	_____

Volunteer Experience:

Interests and Skills:

Highest Level of Education: ☐ High School ☐ Vocational-Technical ☐ Undergraduate ☐ Graduate Degree ☐ Other Training

References relative to employment, school or volunteer experience (please list two):

Name	Address	Phone	Relationship
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_____	_____	_____	_____
_____	_____	_____	_____

Your Availability: Please indicate the times that you can volunteer during the week:

Monday _____	Thursday _____
Tuesday _____	Friday _____
Wednesday _____	Saturday _____

How long do you plan to volunteer for the library? ☐ At least 6 months ☐ At least 1 year ☐ Other _____

Within the past seven years, have you been convicted of a crime, pled guilty, or been released from prison? ☐ Yes ☐ No

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If YES, please state the date, place and nature of the offense(s). Volunteer applicants must consent to a criminal history check by the Washington State Patrol.

I certify that all answers or statements I have made on this application or on other supplementary materials are true and correct without omissions. I authorize Spokane Public Library to contact any employer, organization or party necessary to obtain information concerning my previous experience and/or education, except as otherwise indicated. I release Spokane Public Library from all claims and liabilities of any nature arising from such investigations or the supplying of information for such investigations.

In expressing an interest in a volunteer assignment, I give permission for, and understand that with proper notification to me, Spokane Public Library may conduct one or more criminal history background checks on me through the Washington State Patrol or an equivalent inquiry to a federal law enforcement agency. This background check is in compliance with the Child/Adult Abuse Information Act.

I understand that Spokane Public Library will provide reasonable accommodation to qualified volunteers so that the volunteer is able to perform required duties when possible. In some cases, the need for an accommodation may lead to a different volunteer assignment. In the event that I need an accommodation, I understand that I should discuss my need with library staff where I am assigned.

I understand that, should I be assigned as a volunteer, in the course of my volunteer assignment, I may have access to personal information about library users, including their request for information and records of materials they may have borrowed. I hereby agree to hold such information in complete confidence and to access it only as necessary to fulfill my volunteer assignment.

Signature of Applicant _____

Date _____

Please complete the **Attachment to Spokane Public Library Volunteer Application for Adults** form, specifying the volunteer assignments and locations in which you are interested, and return it together with your completed application to Human Resources at the address below. A limited number of volunteer opportunities are available. Applicants are contacted as openings occur at the locations and in the areas of interest indicated on the attachment.

Thank you for your interest in volunteering with your library.