



Volunteer Application

Please return your completed application to Orcas Island Library, or mail to:
Volunteer Coordinator, Orcas Island Library, 500 Rose Street, Eastsound WA 98245
 Please allow up to 10 business days for the application review process.

Application Date: _____ Date of Birth (if under 18): _____

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

In case of emergency, please contact: _____

Best way to contact you: Home phone Cell phone Email

Reason for volunteering: Self-referred School Credit Court Ordered Other

1. Please indicate days and times you are available below:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

2. Are you a seasonal resident? No Yes Dates of Availability: _____

3. Please describe any work/volunteer experience and skills you have: _____

4. Please describe any physical limitations: _____

5. What languages other than English do you speak? _____

6. What types of tasks/duties would you be interested in performing as a library volunteer?

___ **Shelving:** Re-shelve items, straighten & correct misfiled materials, find missing items, some patron interaction. Requires attention to detail, visual and physical stamina.

___ **Mending:** Repair damaged items & replace broken or damaged library packaging. May work in close proximity to one or more other volunteers. Little contact with library patrons.

___ **Circulation Desk:** Check items in and out, conduct initial reference interviews, help with copy machine, sell Friends books and other merchandise. Requires customer service skills, familiarity with computers, and even temperament

___ **Landscaping:** Water plants, weed, mulch, and perform other landscaping tasks around library grounds.

___ **Other:** _____

7. Why do you want to volunteer at Orcas Island Library? _____

8. Are you currently Employed? Retired? It's complicated.

Name of current/most recent employer: _____

Current /most recent job title: _____

9. Is there anything else you would like us to know about you? _____

Volunteer Agreement

Orcas Island Library compares the skills of the applicant to those skills needed to fulfill current volunteer position descriptions. Placement is made based on the recommendation of the volunteer coordinator(s) and the Library director, and the willingness of the applicant to perform the required duties at the times needed by the library.

I certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I understand that any misrepresentation or material omission on the application will result in my being eliminated from further consideration. I also understand that, if I am accepted, any misrepresentation on my application or in an interview that becomes known to the Library may result in immediate dismissal.

I agree to abide by existing and future instruction, rules, and policies of Orcas Island Library. I offer my services as a volunteer with no expectation of monetary compensation and I understand that I will be expected to attend a volunteer orientation.

BY SIGNING BELOW I CERTIFY THE TERMS GIVEN ABOVE.

Applicant signature: _____ Date: _____