



WESTCHESTER PUBLIC LIBRARY

Volunteer Application

Name _____

Address _____

Preferred Phone Number _____

Email _____

Emergency
Contact _____ Phone _____

What type of volunteer work are you interested in? Check all that apply.

General library work Book sales Library programs or events

General Township History Museum work Other _____

Is there an age range you enjoy working with? Check all that apply.

Children Teens Adults Seniors

What is your availability? Weekdays Weekends

Mornings Afternoons Evenings

Other availability details _____

Tell us about your educational background.

Tell us about your previous or current work and/or volunteer experience.

Please provide the name and phone number of two references _____

Why do you want to volunteer for the Library? _____

Do you have special interests, hobbies, or skills? _____

Is there anything else you'd like us to know? _____

Applicant signature _____ **Date** _____

Background checks will be conducted on all volunteer applicants aged 18 years and older.