



Seymour Library Application for Adult Library Volunteer (18+)

Name _____ Date _____
Address _____ Phone _____
Email Address _____

When available, volunteer opportunities are Monday-Thursday mornings and Wednesday & Thursday afternoons. Please check the times when you are available:

- Mondays between 9am and 1pm
- Tuesdays between 9am and 1pm
- Wednesdays between 9am and 1pm
- Thursdays between 9am and 1pm
- Wednesdays between 1-3pm
- Thursdays between 1-3 pm

TALENTS, SKILLS, INTERESTS: If you have any special skills or talents please list them below:

Do you know of anything that would restrict your work?

PREVIOUS EMPLOYMENT: List any previous employers or volunteer experience you may have had. Include addresses and telephone numbers. Start with the most recent employer.

1. _____
Start date: _____ End Date: _____
Reason for leaving: _____

2. _____
Start date: _____ End Date: _____
Reason for leaving: _____

3. _____
Start date: _____ End Date: _____
Reason for leaving: _____

REFERENCES: List three people who know you well (exclude relatives). Please include telephone number and the reference's relationship to you.

1. _____
2. _____
3. _____

EMERGENCY CONTACT PERSON:

Name: _____

Phone number: _____

Relationship to you: _____

PLEASE RETURN THIS TO : Linda Miller at the Seymour Library, 161 East Ave.
Brockport, NY 14420