

5:00-8:00

"The Pass of the Oaks" City of El Paso de Robles 1000 Spring Street, Paso Robles, CA 93446 www.prcity.com

Library Adult Volunteer Program Application

rppheation								
Name and A	Address Fields wit	h an asterisk (*) ar	re required.					
First Name:* Last Name:						*		
Street Address:				* City:		* Zip:	*	
	e*:							
Email Addre	ess:							
Emergency	Contact Informa	tion						
First Name:* Last Name:						*		
Contact Number:* Relationship:						*		
Demograph	nic Information							
makeup of o	otionally provide the pur volunteers and the series and the series and the series are the series and the series are the series	o recognize birthd	1ays. · 55?	a to help us get	a better idea of	the demographic		
My Prograi	m Choice is: Or	going Expres	ss!					
assist staff i year commi	offers two volunte in shelving material tment that provides ry Volunteer page	s and completing an opportunity for	various tasks. ' or a broader lea	The Ongoing pr	ogram is a 2-4	hour per week, or	ne	
Availability	for Ongoing Pro	gram						
	oplying for the Libi volunteer. Checkin							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
8:30-10:	00							
10:00-1:	00							
1:00-5:0	00				<u> </u>			

CLOSED

Availability for Express! Program		
If you are applying for the Library Expresinterview process.	ss! Volunteer Program, days and times will be o	liscussed during the
Training, Skills, Volunteer Experience		
Do you have any particular training, skill	s, or volunteer experience you'd like to share?	
Hobbies and Interests		
Do you have any hobbies or interests you	'd like to share?	
References* (Must be a non-relative)		
,	* Last Name:	k
	* Relationship:	
First Name:	* Last Name:	*
Contact Phone:	* Relationship:	k
	VOLUNTEER AGREEMENT	
of Paso Robles' rules and procedures to the b obtain. I agree to participate in orientation and	f Paso Robles, I may be subject to fingerprinting. I a est of my ability. I agree to respect the confidential r I training as required by my assignment. I also agree Paso Robles, including but not limited to, the city v	e to allow publication of my
take part in certain library and/or recreational agrees to assume all risks incidental to such p employees harmless from all suits, claims, or undersigned as participant in said volunteer p employees, from all suits, claims or demands have arising out of or by reason or in connect	ompleted prior to participation in any volunteer activities. In consideration for and as a condition of articipation and agrees to hold the City of Paso Rob demands of every kind and character arising out of crogram. Participant further releases the City of Paso of every kind and character that participant's succession with the course of instruction and/or activities could physical condition and physically fit to participat	such participation, participan les, its instructors, and or in connection with the Robles, its instructors and sors or assigns shall or may ontemplated in the program.
will not discriminate against qualified individ activities. The City of Paso Robles will make disabilities have an equal opportunity to enjoy	I of the Americans with Disabilities Act of 1990 (A uals with disabilities on the basis of disability in its all reasonable modifications to policies and program all of its programs, services, and activities. For exact es offices, even where pets are generally prohibited.	services, programs, or ns to ensure that people with ample, individuals with service
policies or procedures to participate in a prog Paso Robles no later than 48 hours before the	n auxiliary aid or service for effective communication ram, service, or activity of the City of Paso Robles, scheduled event. The ADA does not require the Citure of its programs or services, or impose an undue of	should contact the City of y of Paso Robles to take any
Applicant's Signature:	,	* Date:*