

# York County Library System

Answers for Living ♦ Knowledge for Life ♦ [www.yorklibraries.org](http://www.yorklibraries.org)

## ADULT VOLUNTEER APPLICATION

Qualified applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or disability. The use of this application does not create a contract between you and York County Library System. It does not indicate that there are positions open and does not in any way obligate you or York County Library System. To be considered as a volunteer, **an original copy of a Criminal Record Check and a Child Abuse History Clearance must be submitted with this application. These documents will be considered valid if they are issued within one year of the filing of this application.** Only candidates that will be given further consideration will be notified. Please answer all questions as completely as possible.

### Contact Information:

_____	_____	_____
Last Name	First Name	Middle Initial
_____	_____	_____
Street	City	State
_____	_____	_____
Phone Number	Email Address	
_____	_____	
Birthday – Month & Day	Today's Date	

### Library Location - Where do you want to volunteer?

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Glen Rock            | <input type="checkbox"/> Glatfelter- Spring Grove | <input type="checkbox"/> Martin-York               | <input type="checkbox"/> Village-Jacobus |
| <input type="checkbox"/> Collinsville- Brogue | <input type="checkbox"/> Guthrie-Hanover          | <input type="checkbox"/> Mason-Dixon- Stewartstown |  |
| <input type="checkbox"/> Dillsburg            | <input type="checkbox"/> Kaltreider-Red Lion      | <input type="checkbox"/> Paul Smith- Shrewsbury    |  |
| <input type="checkbox"/> Dover                | <input type="checkbox"/> Kreutz Creek-Hellam      | <input type="checkbox"/> Red Land-Etters           |  |

### General Areas of Interest - What type of position are you interested in?

- |   |  |
|---|--|
| <input type="checkbox"/> Shelving books     | <input type="checkbox"/> Children's programs           |
| <input type="checkbox"/> Covering books     | <input type="checkbox"/> Helping customers             |
| <input type="checkbox"/> Computer support   | <input type="checkbox"/> Administrative support        |
| <input type="checkbox"/> Preparing displays | <input type="checkbox"/> Assisting with special events |

Other \_\_\_\_\_

### Availability - During which hours are you available for volunteer assignments? Check all boxes that apply.

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

### Education - Check the highest education level achieved.

\_\_\_\_\_ High School      \_\_\_\_\_ Vocational or Business School      \_\_\_\_\_ College or University

Please list any work experience, special skills, or hobbies that may qualify you for a volunteer position: (Examples: computer skills, member of a book club, enjoy working with children, like to tell stories, etc.)

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Please indicate why you are interested in volunteering at a public library in York County:

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Please list two references and provide contact information (phone number or email address):

1. \_\_\_\_\_
2. \_\_\_\_\_

### **Agreement, Authorization and Release**

*Please read carefully before signing.*

I certify that the information given by me in this application is true and complete. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge or refusal of a volunteer position by York County Library System.

I understand and acknowledge that this is an application for a volunteer position and that nothing contained in this application or in the granting of an interview is intended to create a contract of employment.

I understand and agree that all information furnished in this application may be verified by York County Library System. I also understand that any offer of a volunteer position is subject to a satisfactory check of references and the submission of a *Criminal Record Check* and a *Pennsylvania Child Abuse History Clearance*. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give York County Library System all information relative to my work habits and character and hereby release such individuals, organizations and the Library from any liability for any claim or damage which may result.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Date revised: 12/10/12