



Volunteer Application Form

(Please complete both sides.)

Name: _____ Date: _____
(First) (Last)

Address (include street, city, and zip code): _____

Work phone: _____ Home Phone: _____

Cell phone: _____ Best number/time to call: _____

E-mail: _____

Volunteer position for which you're applying: _____

Preferred category of service (please check):

Standard commitment
(The Library asks volunteers to commit to at least two hours per week for at least **six** months.)

Other _____

If you are a student please complete the following:

School: _____

Grade/Year: _____

Age (if under 18): _____

How did you learn about volunteer opportunities at NOLS?
(Please check all that apply.)

- Inquired at the Library From a friend Saw a flyer Saw a newspaper ad
 NOLS website Other _____

Preferred work location(s) (Please indicate priority (1, 2, 3), if you are willing to volunteer at more than one branch.):

() Port Angeles () Sequim () Clallam Bay () Forks

Preferred work day(s) (Please indicate priority (1, 2, 3), if you are available on multiple days of the week.):

() Mon. () Tues. () Wed. () Thurs. () Fri. () Sat.

Preferred time of day: _____

Preferred maximum number of work hours per week: _____

(The Library asks for a minimum of two hours.)

Why are you interested in volunteering with the North Olympic Library System? _____

Current and past employment and/or volunteer experience:

Position/title: _____ Dates: _____

Employer/Agency: _____

Brief description of duties: _____

Position/title: _____ Dates: _____

Employer/Agency: _____

Brief description of duties: _____

List any special skills, training, or languages spoken: _____

Attach additional sheet, if more room is needed.

Please provide three work-related references (students may use teachers):

1. Name: _____ Relationship: _____

Phone: _____ E-mail: _____

2. Name: _____ Relationship: _____

Phone: _____ E-mail: _____

3. Name: _____ Relationship: _____

Phone: _____ E-mail: _____

I understand and agree that as a volunteer who is 18 years or older, I will be required, before placement in a volunteer position, to have a Washington State Patrol background check (at no cost).

I acknowledge that there is no salary or other compensation for my services as a volunteer.

I certify that the information provided above is accurate.

Signature: _____ Date: _____

Signature of parent/guardian: _____ Date: _____

(Required if applicant is under age 18)

*Thank you for your interest in volunteering with the North Olympic Library System.
Once your application form has been processed, you will be contacted by a member of the staff.*

www.nols.org

