## Pittsylvania County Public Library System Adult Volunteer Application & Guidelines

Please complete both sides of this application so that we can discover more about you, your interests, your skills, and your intentions in volunteering with us.

Name					
Address					
Telephone					
Emergency Contact:	Name: Telephone:				
How did you	hear about ou	r volunteer pro	ogram?		
What is your availability: □ Weekly □ Summer only					
□ Periodically	y (on-call)	School year on	ly START	DATE:	
Please indica	te the times of	day you will be	e available to v	olunteer:	
Mon	Tues	Wed	Thurs	Fri	Sat
What would	vou like to do	while volunteer	ring with us?		
What would you like to do while volunteering with us?  □ Book Sales □ Assist with Children's Programs □ Assist with Special Events					
□ Shelf maintenance □ Mailings and surveys □ Shelving					
Other (please l	ist):				
		hysical limitation If yes, please ex	-	problems that i	night affect
Please list th	ree personal re	ferences and th	neir phone nur	nbers:	
1)					
2)					
3)					

Prior experience/ work history:				
Additional comments:				
Signature:	Date:			
Please print your name:				

## **Adult Volunteer Guidelines**

- Adult volunteers must be at least 18 years old to work at the Pittsylvania County Public Library. Working with the public is required. Volunteers must arrange their own transportation to and from the library. Volunteers may not be in the library when it is not opened unless specifically arranged with staff.
- Library etiquette is to be followed. This includes:
  - o Following the staff dress code
  - o No food or drink in the main area of the library.
  - Cell phones are turned off.
- Please call the library if you are unable to come in on a day you are scheduled to volunteer.
- Sign in at the desk with a staff member.
- Work assignments will be available for you each day you volunteer. Please ask, if you need more direction to complete your tasks.
- Please let the staff know when you have finished your time and are leaving, and sign out.

We are happy you have decided to volunteer at the library and hope this will be an enjoyable experience for you. Please sign below, indicating you agree to these guidelines. A copy of this agreement will be given to you for future reference.

I have read and understan	d the Volunteer Guidelines:
<b>Signature</b>	Date
Print name	-