

# Newburyport Public Library



## Volunteer Application Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact & Phone: \_\_\_\_\_

Education:

High School: \_\_\_\_\_ Class: \_\_\_\_\_

College: \_\_\_\_\_

Other: \_\_\_\_\_

Work & Volunteer Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any skills that would be useful as a library volunteer? \_\_\_\_\_

\_\_\_\_\_

What type of work are you interested in doing? \_\_\_\_\_

\_\_\_\_\_

How many hours a week would you like to volunteer? \_\_\_\_\_

What days and hours are you available? \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_