

Adult Library Volunteer Application

1. Fill out this application form and SKILLS QUIZ and turn it in to one of the library staff or email to kalena.powell@georgetown.org
2. The Volunteer Coordinator will contact you shortly about upcoming Volunteer Orientation dates.
3. Volunteers should be able to read and understand the Dewey Decimal numbers and spine labels. If you have problems, training is available.
4. Volunteers should become familiar with the library, locations of collections, and shelve materials in the correct locations.

.....

Name _____ Date of Birth ___/___/___

Address _____ City _____ Zip _____

Phone _____ E-Mail _____

What is your preferred method of contact? **Circle one:** phone email

Emergency Contact: _____ Relationship: _____

Phone _____

Previous library and/or work experience: _____

Hobbies/Interests: _____

***Volunteer Opportunities:** Check those that interest you. Extra training may be needed for some opportunities.

_____ **Shelving Materials:** Requires light lifting, walking /standing, and pushing a book cart. Occasionally involves straightening messy shelves and reading shelves for accuracy.

_____ **Checking In Materials:** Requires assessing the condition of returning materials and sorting according to condition and collection. This can be done in combination with shelving. Knowing the library collection is a plus.

_____ **Book/Material Processing:** Requires training by staff to prepare materials for public use. Social interaction is limited. If you are detail-oriented and enjoy working quietly and independently, this could be the job for you! Processing requires a 2 hour block of time.

What times would you prefer to work? Check spaces to indicate availability.

Day of the Week:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							