

## REQUIREMENTS AND TASKS

Thank you for your interest in volunteering for Ada Community Library. Adult volunteers should:

- Be at least 18 years of age
- Complete an application
- Follow the same work and behavior policies as library employees
- Meet with the Volunteer Coordinator to set volunteer hours

Volunteer hours take place when the library is open. Volunteers are trained and supervised by the Volunteer Coordinator. Volunteers do not perform the same tasks as employees. Volunteers sign in and out to keep a record of their work hours. Volunteer duties may include:

- Shelving media
- Straightening books and materials on the shelves and shelf reading
- Cleaning and dusting
- Sorting and boxing up donations
- Cleaning books and materials
- Working on projects for the Friends of the Library such as the book sale
- Assisting with events such as Summer Reading and the World Music Celebration
- Trimming and weeding flower beds
- Collecting and disposing of litter in parking lot

Do you have any restrictions that may limit certain types of activities such as lifting boxes, reaching various shelf heights, moving tables, etc? (If yes, then please list only restrictions and not specific medical conditions.)

## VOLUNTEER STATUS AGREEMENT

I agree and understand that any work that I may perform on behalf of the Ada Community Library will be provided on a voluntary basis and I understand that a volunteer position does not constitute an employee-employer relationship with the Ada Community Library.

I agree to follow the rules and regulations of the Ada Community Library. I agree to respect the confidential nature of information that I may become aware of as a volunteer for the Ada Community Library.

I understand that a background check will be obtained if required for my assignment and that references will be contacted.

### SIGNATURES

Volunteer Applicant

Date

Volunteer Coordinator

Date

Volunteer Coordinator:

Emily Johnson  
ejohnson@adalib.org  
208-297-6700

## VOLUNTEER APPLICATION ADULT

Become a

# Volunteer

Share your expertise  
Meet new people  
Help your community



ADA COMMUNITY  
LIBRARY • adalib.org

LAKE HAZEL  
BRANCH  
10489 Lake Hazel Rd  
Boise, ID 83709 • (208) 297-6700

## PERSONAL INFORMATION

Name

Street or Mailing Address

City, State, ZIP

Home Phone

Cell Phone

Email Address

Education completed:

High school  Vocational training  Some college

College degree  Graduate school degree

Are you currently a student?  Yes  No

Name of school

Area(s) of study

Are your volunteer hours needed for class credit?

Yes  No

Are your volunteer hours court ordered?

Yes  No

Organization represented (if applicable)

## AVAILABILITY AND EXPERIENCE

What days and times are you available? Library hours are: Mon – Fri 10am – 9pm • Sat 10am – 5pm

When can you start volunteering?

Why would you like to volunteer?

List your previous volunteer experience:

What did you like/dislike about your volunteer experience?

Please list your interests, hobbies, skills and community activities.

## EMERGENCY CONTACT INFORMATION

Name

Phone

Relationship

## TWO REFERENCES

Name

Phone

Relationship

Name

Phone

Relationship