



Chippewa River District Library

www.crld.org

VOLUNTEER APPLICATION

Personal Information

Name _____ Gender: Female / Male

Street Address _____

Apt/Unit # _____ City _____ State _____ ZIP _____

Telephone number(s) _____ (home) _____ (mobile)

Email Address _____ Date of Birth ____/____/____

Race: White Black Asian/Pacific Islander American Indian/Alaskan Native Unknown/Other

Any physical limitations we should know about? (circle one) YES NO

If yes, please briefly explain:

Thank you for your willingness to assist your library to better serve the community!

I understand that Chippewa River District Library (CRDL) does not unlawfully discriminate in volunteer positions and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for volunteering on a basis prohibited by applicable local, state or federal law.

Photographic release: I hereby give permission for images or audio of myself or my child, captured by CRDL through video, photo and digital camera, to be used solely for the purposes of CRDL promotional material and publications, and waive any rights of compensation or ownership thereto.

It is the policy of the CRDL to perform background checks on all employees and volunteers working for the library.

Signature of Applicant _____ Date ____/____/____

Signature of Parent or Guardian for minors _____

I give my minor child permission to volunteer at events off site or after hours under staff supervision.

Faith Johnston Memorial Library 4035 N. Mission Rosebush, MI 48878 989.433.0006	Fremont Township Community Library 7959 S. Winn Winn, MI 48896 989.866.2550	Shepherd Community Library 257 W. Wright Shepherd, MI 48883 989.828.6801	Tate Memorial Library 324 Main Blanchard, MI 49310 989.561-2480	Veterans Memorial Library 301 S. University Mt. Pleasant, MI 48858 989.773.3242
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Do Not Write Below Line – Administrative Use Only

Received date _____ Background Ck Result/Date _____ Called _____ Orientation _____

Assignment _____



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Volunteer Requirements

- You must be at least 13 years of age or entering 7th grade to volunteer at the library.
- All volunteers are required to pass a background check provided by the library.
- Applicants must provide a valid e-mail address for communication purposes.
The library uses **VolunteerSpot as our database to schedule volunteers.*

If you have any questions regarding this application please contact Lisa McCartney at 989-773-3242 Ext. 212.

Volunteer Preferences

Number of hours preferred per week _____

Preferred location(s) (please circle): *Mt. Pleasant Rosebush Winn Blanchard Shepherd*

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time Available							

Skills and Interests

Indicate those areas of skill/interest that pertain to you. Mark as many as are applicable.

Computer Skills

- Inventory
- Minecraft

Outreach Services

- Book Sale

General Library Work

- Sort/organize books & materials
- Processing materials

Program Support

- Activity assistance at events
- Program materials prep
- Set up/tear down for events
- Photographer at events

Other _____



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Emergency Contact Information

Please list two people to be notified in the event of an emergency.

Your name: _____

Name: _____ Phone: _____

Relationship to you: _____

Name: _____ Phone: _____

Relationship to you: _____

Physician's name: _____ Phone: _____

Hospital name: _____ Phone: _____