

# Batavia Public Library Adult Volunteer Application

(Please Print)

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

Name: \_\_\_\_\_  
*Last First Middle*

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_  
*Home Mobile*

Email: \_\_\_\_\_

## Notify in case of an emergency:

Name/Relation: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name/Relation: \_\_\_\_\_ Telephone: \_\_\_\_\_

## Skills:

List special skills, training, interests or hobbies:

List volunteer experiences:

Are you currently employed?

(application continues on back)

**Availability:**

Please check (√) the boxes below to indicate the hours and days you are available to volunteer:

	9:00 a.m.	10:00	11:00	12:00 p.m.	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00
<b>Monday</b>												
<b>Tuesday</b>												
<b>Wednesday</b>												
<b>Thursday</b>												
<b>Friday</b>												
<b>Saturday</b>												
<b>Sunday</b>												

**Other:**

Do you have special needs that should be considered?

Why do you want to volunteer at Batavia Public Library?

---

Volunteer Signature

Date

Your interest in the Batavia Public Library is appreciated.

If you have any questions or concerns, please contact Lea Pottle, Volunteer Coordinator, by email at [lpottle@bataviapubliclibrary.org](mailto:lpottle@bataviapubliclibrary.org) by phone (630) 879-1393 ext. 330.

Start Date : _____
End Date : _____
Dept/Program: _____