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~ Ontario's westernmost public library ~



APPLICATION TO VOLUNTEER

V1.0 APR 11

[The information on this form is collected under the authority of the Ontario Public Libraries Act and will be kept confidential.]

Last Name	
First Name	
Mailing Address	
Home Telephone Number	
Email	
Are you a student?	
Emergency Contact - Please provide names and telephone numbers of two people who we may contact in an emergency. This information will be kept confidential and be available only to staff and who may need the information in an emergency.	

Questions:

1. Have you volunteered before? Tell us about it.

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2. If you are working or have worked before, tell us briefly about your jobs.

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3. Tell us about your personal interests, hobbies and activities.

4. Tell us about your computer skills – Extreme? Beginner? Somewhere in the middle?

5. Are there things that might make it difficult for you to volunteer at the Library?

6. Tell us the most important reason you would like to volunteer at the Library.

REMEMBER:

- If you are under 16 years of age, you must have a parent or guardian sign this form with you.
- Volunteers over 18 will need to submit a criminal reference check at their own expense. We ask for this because the library works with vulnerable people, including children.
- Volunteers have many of the same rights and responsibilities as library employees, and will need to follow library rules (especially keeping information confidential). The Librarian will train you and check on your work.
- Student volunteers are normally limited to 40 hours of work.

SIGNATURE OF VOLUNTEER APPLICANT _____

SIGNATURE OF PARENT OR GUARDIAN _____

TODAY'S DATE _____