

Kuna Library Volunteer Application

Bring completed form to the library or email to kunalibprograms3@gmail.com

VOLUNTEER INFORMATION

Name: _____ Age: _____

Parent/Guardian (if under 18): _____

Address: _____

Phone Number: _____

Receive Text Messages? : Y N

Email: _____

Preferred Method of Communication (circle): Call Text Email

EMERGENCY CONTACT

Name: _____

Relation: _____

Phone Number: _____

General Availability (Please check box):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning (9:30-12:00)						
Afternoon (12:00-4:30)						
Evening (4:30-8:00)						

Is there anything you'd like us to know? (Specific areas you'd be interested in volunteering in. Previous experience that might be relevant. Anything else you'd like us to know/be aware of. Use separate page if needed):

Agreement:

I, _____, do hereby indemnify and hold harmless the Kuna Library from any and all liability, claims or causes of action that may arise for any accidents, injuries or illnesses that may occur to me from my participation as a volunteer. I waive any right of action I have against the Kuna Library in consideration of my participation as a volunteer for the library. I acknowledge that as a volunteer I will not be covered by Worker's Compensation.

Volunteer Name Printed: _____

Volunteer Name Signature: _____ Date: _____

Parent/Guardian Name (If under 18) Printed: _____

Parent/Guardian Signature: _____ Date: _____

VOLUNTEER COMMITMENTS AND POLICIES

- 1. I will perform only the duties of my volunteer assignment as required by my supervisor**
- 2. I will not obtain telephone numbers, email addresses, or home addresses from patrons for my personal use.**
- 3. I will follow Kuna Library rules and I will behave appropriately. I will support Kuna Library policies.**
- 4. I will maintain confidentiality of the library's confidential information, and I will not use such information for any personal use.**
- 5. I will be free from the influence of alcohol or illegal substances when volunteering.**
- 6. I will inform my supervisor if I will be absent or when I stop volunteering.**
- 7. I will inform my supervisor of any change in my address, telephone number, or emergency contact.**
- 8. I will attend any training required for my volunteer position, and I will volunteer at the required times in order to remain an active volunteer.**
- 9. I will follow the appropriate dress code.**
- 10. I will not bring friends, family members, or other unauthorized people to my volunteer assignment.**

FOR LIBRARY STAFF

Date Received: