

# Kuna Library

## Summer Volunteer Application

**Bring completed form to the library or email to [hnielson@kunalibrary.org](mailto:hnielson@kunalibrary.org).**  
 You may also email any volunteer questions before submitting your application.

**VOLUNTEER INFORMATION**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ (must be 12 or older)

**Parent/Guardian name (if under 18):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

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

**Preferred Method of Communication (circle):**    **Text**        **Email**

**EMERGENCY CONTACT**

**Name:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Availability (all shifts are 9:15am-12:45pm on Tuesdays and/or Wednesdays)**

Date:	Mark box if available* <small>*We, at the Kuna Library, understand that schedules can change. Please mark any days that you think you may be available, and we will contact you closer to the date to ensure that nothing has changed in your schedule.</small>
Tuesday June 2	
Wednesday June 3	
Tuesday June 9	
Wednesday June 10	
Tuesday June 16	
Wednesday June 17	
Tuesday June 23	
Wednesday June 24	
Tuesday June 30	
Wednesday July 1	
Tuesday July 7	
Wednesday July 8	
Tuesday July 14	
Wednesday July 15	

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Tuesday July 21	
Wednesday July 22	

I understand that I will need to attend the mandatory volunteer training session on **Tuesday, May 19<sup>th</sup> at 3:30pm** to volunteer at the Kuna Library. **Initial here** \_\_\_\_\_

**Is there anything you'd like us to know? (Specific reason for seeking a volunteer opportunity. Previous experience that may be relevant. Anything else you'd like us to know/be aware of. Use a separate page if needed):**

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\_\_\_\_\_

**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: \_\_\_\_\_

\_\_\_\_\_

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### **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.**

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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. I confirm that I am 12 years old or older.
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:**