VOLUNTEER APPLICATION FORM
Memphis Public Library & Information Center
Volunteer Coordinator
3030 Poplar Ave.
Memphis, TN 38111-3527
Phone (901) 415-2840 FAX (901) 323-7902

Date_________________________

Mrs. Mr. Miss Ms.
(circle one)

Last Name First Name Middle Name

Street Address

Home Phone ___________________________

Work Phone ___________________________

City State Zip Code

Cell Phone ___________________________

Email ________________________________ Under Age 18 Yes or No (If yes, list birth date) _____/_____/_____

School ______________________________ Grade _______________

What would you like to do in the Library? Please check one or more of the following.

Central Library

☐ 211/LINC
☐ Administrative
☐ Bookstore clerk
☐ Book sorter – Friends of the Library
☐ Computer Assistant or Trainer
☐ Docent/Tour Guide
☐ History/Archives
☐ Special Events/Projects
☐ Welcome Desk
☐ WYPL
☐ Cloud 901 (Teen Learning Lab)

Branches

☐ Computer Assistant
☐ Friends of the Library*
☐ Program Assistant
☐ Shelving/Office
☐ Special Events/Projects

*Requires a Friend’s Membership Fee

Branch preference _______________________

Number of hours available per week _____________

Note day and time availability below.

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Education (Highest Level)

☐ Grammar School
☐ High School
☐ College
☐ Post-graduate

College Degree(s) or Professional Training

Languages

Employment Current Prior

Employer

Responsibilities

Occupation/Title

Form#1A rev 8/2015
Why do you want to volunteer at the Memphis Public Library?

Have you ever done volunteer work before?  □ Yes  □ No
If yes, please provide the organization name, volunteer coordinators name, contact information and dates of service.

Special talents and skills

How did you hear about volunteer opportunities at the Library?

Do you have any physical conditions that we need to be aware of in case of medical emergency?

Have you ever been convicted of an offense other than a minor traffic violation?  □ Yes  □ No
If yes, please explain_______________________________________________________

Are there any criminal charges pending against you?  □ Yes  □ No
If yes, please explain_______________________________________________________

Emergency Contact Person

Name ___________________________ Phone _________________ Relationship _______________________
Name ___________________________ Phone _________________ Relationship _______________________

Volunteer Release and Waiver Agreement

Please read the below information and sign

I certify that the statements made in the volunteer application are true and correct and have been given voluntarily. I understand misrepresentation of any information may result in termination of my volunteer involvement.

I am volunteering for personal reasons. I understand I will not be paid for my services as a volunteer and expect no compensation.

I give my consent to Memphis Public Library to use interviews, photographs, or video of myself (my child) for promotional and educational purposes in the media.

I hereby agree to release, waive, and discharge MPLIC from any and all claims or liabilities resulting from my volunteer services. I hereby agree not to institute or assist in any action or suit at law or in equity against the City of Memphis, Memphis Public Library & Information Center, its officers, employees, agents, or otherwise, for compensation, damage, loss or injury either to person or property, or both arising out of volunteer services. Applications for minors will only be accepted with a parent’s signature (Minimum age of 14).

Should I become a volunteer, I agree to:

• Comply with the rules and regulations of the Memphis Public Library & Information Center.
• Perform my volunteer duties to the best of my ability and act at all times as a member of the team
• To meet time and duty requirements, or provide adequate notice and attempt to arrange for alternative arrangements.

Signature of Volunteer Applicant ___________________________ Date _________________

Signature of Parent/Guardian if applicant is under age 18 ___________________________ Date _________________

Subject to background check

Form#1A rev 8/2015