



OREGON TRAIL LIBRARY DISTRICT

VOLUNTEER APPLICATION

- PERSONAL INFORMATION

Name _____ E-Mail Address _____

Telephone _____ Cell Phone _____

Mailing Address _____

In Case of Emergency, notify

- Name _____ Phone _____

- Relationship _____

You must be at least 14 to volunteer. Volunteers under 18 must have a parent/guardian complete the consent section on the reverse side of this application.

Age if under 18 _____

- VOLUNTEER INTERESTS

Why do you want to volunteer?

I would be interested in assisting with (check volunteer assignments listed below)

- Advocacy for libraries at public hearings and meetings
- Children's Room activities * (applicants subject to background check)
- English conversation groups *
- Exhibitions/Displays/Events
- Letter writing to elected officials
- Literacy tutoring
- Shelving and maintenance of library materials *
- Teen activities * (applicants subject to background check)
- Other

* Training provided.

By completing and submitting this application, I hereby certify, understand, and agree that I am applying for a position as a volunteer, as that term is defined by the Fair Labor

Standards Act, and that any services that I may provide to the Oregon Trail Library District will be rendered solely in my capacity as a volunteer, and free from coercion or duress. I further certify, understand, and agree that, in consideration for my services as a volunteer, I will receive no compensation, wages, earnings, or benefits from the Library, and I maintain no expectation or hope of receiving any compensation, wages, earnings, or benefits, nor has the Library, or any employee or agent thereof, made any representation or promise regarding my receipt of compensation, wages, earnings, or benefits. Finally, I expressly represent and warrant that I desire to be engaged by the Library as a volunteer for civic, charitable, or humanitarian reasons, purposes, or motives, and will render services in my capacity as a volunteer in accordance with such reasons, purposes, or motives

• LOCATION PREFERENCE

- Boardman
- Heppner
- Irrigon

• OCCUPATION AND/OR EDUCATION

Circle highest grade completed 9 10 11 12

College/Graduate School (degrees completed) _____

Current and /or former Occupation _____

Employer _____

Are you a student? Yes or No (circle)

Which school do you attend? _____

• SKILLS

Do you know how to use a computer? Yes No A little (circle)

Are you familiar with:

- Internet
- Word
- Microsoft Excel

What special interests and/or skills do you have that may help us to match you with the best volunteer assignment? _____

• REFERENCE INFORMATION:

Please provide a reference.

Personal Professional (circle one)

Name (first and last) _____ Phone _____

Applicant Signature _____ Date _____

PARENT/GUARDIAN CONSENT (for volunteers under age 18)

I give permission for the above applicant to volunteer at The Oregon Trail Public Library for a maximum of _____ hours per week (three hours minimum). If you need to reach me, my phone number is:

Day _____ Evening _____

Cell _____

Parent/Guardian Signature _____ Date _____

FOR OTLD LIBRARY DIRECTOR ONLY

Interview Date _____ Interviewed by _____

Accepted Yes No

Start Date _____ Assignment _____

Comments:
