



# VOLUNTEER APPLICATION FORM

Please print clearly and complete both sides of this application. Volunteers must be at least 12 years old. If you are under 18, a parent or guardian's signature is required.

## Personal Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (H) \_\_\_\_\_ (e-mail): \_\_\_\_\_  
 Current Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 How did you find out about volunteer opportunities at the library? \_\_\_\_\_

## Education:

Current School: \_\_\_\_\_  
 Highest grade completed: \_\_\_\_\_ Degree(s): \_\_\_\_\_

## Emergency Contact Person:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Availability (check all that apply):</b>	Morning							
	Afternoon							
	Evening							
	Special Events							

Belmont – 1041 Watervliet Ave.	_____	Miamisburg – 35 S. Fifth St.	_____
Brookville – 425 Rona Parkway	_____	New Lebanon – 715 W. Main St.	_____
Burkhardt – 4680 Burkhardt Ave.	_____	Northmont – 333 W. National Rd.	_____
East – 2008 Wyoming St.	_____	Northwest – 2410 Philadelphia Dr.	_____
Electra C. Doren – 701 Troy St.	_____	Outreach Services	_____
Genealogy Center – 359 Maryland Ave.	_____	Trotwood – 51 E Main St.	_____
Huber Heights – 6160 Chambersburg Rd.	_____	Vandalia – 500 S. Dixie Dr.	_____
Kettering Moraine – 3496 Far Hills Ave.	_____	West Carrollton – 300 E Central Ave.	_____
Madden Hills – 2542 Germantown St.	_____	Westwood – 3207 Hoover Ave.	_____
Main Library – 215 E. Third St.	_____	Wilmington Stroop – 3980 Wilmington Pike	_____
Miami Township – 2718 Lyons Rd.	_____		

## Interests:

Please check any activity that interests you:

<input type="checkbox"/> Advisory Council Member	<input type="checkbox"/> Computer Assistant	<input type="checkbox"/> Publicity
<input type="checkbox"/> New Facilities Greeter	<input type="checkbox"/> General Library Assistant	<input type="checkbox"/> Last Minute Help/Calls
<input type="checkbox"/> Program Helper	<input type="checkbox"/> Special Event Assistant	<input type="checkbox"/> 3D Printing Helper
<input type="checkbox"/> Booksale Helper	<input type="checkbox"/> Circuit Maker Kit Helper	<input type="checkbox"/> Computer Helper
<input type="checkbox"/> Computing Maker Kit	<input type="checkbox"/> Conversation Partner	<input type="checkbox"/> ETextile Maker Kit Helper
<input type="checkbox"/> Family History Indexer	<input type="checkbox"/> General Library Helper	<input type="checkbox"/> Homebound Delivery Helper
<input type="checkbox"/> Homework Helper	<input type="checkbox"/> Kitchen Maker Kit Helper	<input type="checkbox"/> Laser Maker Kit Helper

\_\_\_\_\_ Music Maker Kit Helper

\_\_\_\_\_ Photography Maker Kit

\_\_\_\_\_ Program Helper

\_\_\_\_\_ Publicity Helper

\_\_\_\_\_ Reading Buddies

\_\_\_\_\_ Seed Lending Library Helper

\_\_\_\_\_ Stop Motion Maker Kit Helper

\_\_\_\_\_ Summer Challenge Help

\_\_\_\_\_ Summer Meal Program Helper

\_\_\_\_\_ Test Proctoring Helper

\_\_\_\_\_ Textile Maker Kit Helper

\_\_\_\_\_ Library Mascott (see mascot applicant info)

**For Mascot Applicants: I HAVE READ THE FOLLOWING AND CERTIFY THAT:**

- I meet the physical requirements/limitations of the Mascot costume by being between 5'1" - 5'8" tall and weigh up to 185 pounds
- I am willing to be trained in the Mascot's "signature moves" and follow all other safety guidelines and rules set forth by Dayton Metro Library
- I consider myself outgoing and good with children, friendly and engaging, spirited and enthusiastic
- I feel comfortable with my current physical ability, endurance, and strength to move freely and energetically in the Mascot costume; I have no health or physical issues which would hamper my ability to perform as the Mascot or which might cause performing as the Mascot to be unsafe to my health; I am covered by a personal medical insurance plan
- I have the support of my immediate supervisor (if a staff member), as some appearances may be during working hours

**Volunteer Experience:**

Have you ever volunteered before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, where, and what were your tasks?

\_\_\_\_\_

**Skills:**

Do you have any special skills that you would like to share at the library?

\_\_\_\_\_

Do you speak a second language? If so, what language? \_\_\_\_\_

**References:**

Please list two references in the space provided (no family members and references must be over age 18):

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Please sign below when you have read and understood this statement:**

The information I have provided is accurate and true to the best of my knowledge. My signature indicates permission for the Dayton Metro Library Volunteer Services Manager to contact my personal references. I understand that the Dayton Metro Library is not obligated to provide a volunteer placement in the organization, nor am I obligated to accept a volunteer position if offered. Further, I understand that in order to volunteer for a position requiring direct service to patrons, I will be required to submit fingerprints to the BCII, and that in accordance with SB 187 may be asked to submit fingerprints at any time.

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

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**My son or daughter has my permission to volunteer at the Dayton Metro Library.**

Parent/Guardians Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*(Required if applicant is under 18)*

**Please return this application to a library branch or mail to:**

David Hicks, Volunteer Services Manager

Dayton Metro Library, 215 E. Third Street, Dayton, OH 45402

For Questions? Call (937) 496-8638 or Email dhicks@daytonmetrolibrary.org