

# Goodnow Library Volunteer Application Form

Please print clearly. Applicants under 18 years of age, require a parent's signature.

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

I wish to be a long term volunteer:  Yes  No

Volunteering is part of a community service requirement:  Yes  No

Number of hours to fulfill \_\_\_\_\_ to be completed by \_\_\_\_\_

I am available:

	Su	M	T	W	Th	F	Sat
Morning							
Afternoon							
Evening							

Please indicate area of interest:

\_\_\_\_\_ Working in:

\_\_\_\_\_ Adult Dept    \_\_\_\_\_ Children's Dept    \_\_\_\_\_ Teen Room

\_\_\_\_\_ Shelving materials/Shelf reading

\_\_\_\_\_ Gathering requested materials

\_\_\_\_\_ Back-office processing

\_\_\_\_\_ Clerical

\_\_\_\_\_ Special projects and events

\_\_\_\_\_ Computer related tasks

Other: \_\_\_\_\_

Please list any special skills (For example, computer proficiency):

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Do you have any physical limitations that might restrict your activity?

No       Yes (please explain briefly): \_\_\_\_\_

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*Contact in case of emergency:*

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

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

*Best number to reach them:* \_\_\_\_\_

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

***Applicants under 18:***

Signature of Parent or Legal Guardian: \_\_\_\_\_

**INTERNAL USE ONLY:**

Applicant contacted on: \_\_\_\_\_

Notes on where and when placed: \_\_\_\_\_

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**GOODNOW LIBRARY**



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