

## COOK MEMORIAL LIBRARY VOLUNTEER APPLICATION

This application constitutes the preliminary selection process. The Library reserves the right to deny applications. Volunteers must have a background check prior to starting. There is no cost to the volunteer for this check.

Name \_\_\_\_\_  
Last First Initial

Address \_\_\_\_\_  
Street City State Zip Code

Telephone \_\_\_\_\_  
Daytime # Evening # Cell #

Email Address \_\_\_\_\_

1. Circle the day or days of the week that you are most available to volunteer.

Monday Tuesday Wednesday Thursday Friday Saturday

2. How many hours do you think you would be able to commit to volunteering?

\_\_\_\_\_per week OR \_\_\_\_\_per month

3. Describe any past experience you have working in libraries.

4. List any volunteer organizations in which you have served.

5. I want to be a library volunteer because...

6. My special interests/talents include...

7. Factors that motivate me in a volunteering role are:

\_\_\_ Personal satisfaction

\_\_\_ Resume/skill building

\_\_\_ Public recognition  
(e.g., news article)

\_\_\_ Community Involvement

\_\_\_ Other \_\_\_\_\_

### VOLUNTEER EXPECTATIONS

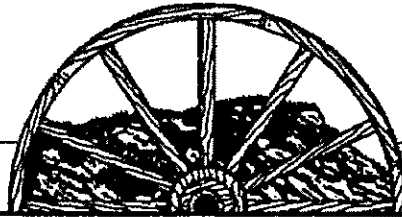
**DEPENDABILITY** The ability to depend on a volunteer is an essential expectation. We look forward to the volunteer's commitment to report at an expected time and to complete the volunteer assignment thoroughly and enthusiastically.

**PROFESSIONALISM** The volunteer is a role model in dress, manner and behavior. Working in a team environment cooperatively with others and demonstrating a willingness to learn are integral parts of professionalism.

**CONFIDENTIALITY** The volunteer must respect the confidentiality of sensitive patron information. Such information should not be discussed outside the library environment.

**COMMUNICATION** The volunteers' success depends on effective communication. Asking questions and following directions are key components of communication.

CITY OF



LA GRANDE

THE HUB OF NORTHEASTERN OREGON

Finance/Water/Human Resource Divisions P.O. Box 670 La Grande, OR 97850 541 962-1313 fax 541-962-1322

Volunteer Waiver

AUTHORIZATION TO RELEASE INFORMATION

AND

PERSONAL INQUIRY WAIVER

I understand that my volunteering with the City of La Grande is contingent upon investigation of my background, including but not limited to character, criminal and arrest/conviction history, past employment and education. I further understand that this document, signed by me, authorizes the City of La Grande to investigate, criminal records, and any other records necessary to determine job-related qualifications for the volunteer position which I have applied for.

I certify that if I have ever been arrested or convicted for any crime, excluding minor traffic violations; I have noted it on my application for volunteering.

I respectfully request and authorize and indemnify any person, school, current employer, past employer, or organization to provide the City of La Grande with any information concerning my character, criminal history, education and employment records which may be useful to them in making a hiring decision.

I hereby release such persons, organizations and others from any legal liability or damage which may result from providing the requested information. I understand and agree that any information released to the City of La Grande is done so in the strictest confidence and that the contents of that information shall not be released to me even if I'm rejected for this position.

A reproduction of this request shall be, for all intents and purposes, as valid as the original.

Applicant's Signature

Date

Printed Name

Position For Which Applying

Street Address

City/State/Zip

Driver's License Number

State of Issue

Date of Birth

Social Security Number

For Office Use Only

Criminal Background search completed by: \_\_\_\_\_ on \_\_\_\_\_

- Eligible for Hire
- Further investigation recommended