

# Middlesex County Library Volunteer Application



## Contact Information

Name	
Street Address	
City, Prov., Postal Code	
Home Phone	
Work Phone	
E-Mail Address	

## Availability

✓ During which hours are you available for volunteer assignments?

Weekday mornings

Weekend mornings

Weekday afternoons

Weekend afternoons

Weekday evenings

Weekend evenings

## Preferred Location

✓ Tell us which branch you are interested in volunteering at:

- Ailsa Craig
- Coldstream
- Delaware
- Dorchester
- Glencoe

- Ilderton
- Komoka
- Lucan
- Melbourne
- Mount Brydges

- Newbury
- Parkhill
- Strathroy
- Thorndale
- Wardsville

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

## Previous Volunteer Experience

Summarize your previous volunteer experience.

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## Person to Notify in Case of Emergency

Name	
Street Address	
City, Prov., Postal Code	
Home Phone	
Work Phone	
E-Mail Address	

## Closing Statement

I understand that to ensure the safety of Library patrons and staff, I may be asked to complete a Vulnerable Persons Screening Check. The information on this application form is collected under the authority of the Freedom of Information and Protection of Privacy Act, and will be used solely for the purpose of determining eligibility and suitability for volunteer opportunities.

Signature: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

Parental Signature: \* \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

(\* only required if under 18 years)

Thank you for completing this application form and for your interest in volunteering with us.