



Volunteer Application

Thank you for your interest in volunteering for the Middlebury Public Library! Volunteer opportunities are open to anyone 14 years and over, without regard to race, color, religious belief, sexual orientation, gender, gender identity, medical condition, pregnancy, marital status, political belief, culture, age, national origin, ancestry, citizenship, genetic information, military status, or disability.

NAME: _____

ADDRESS: _____ CITY, STATE: _____

EMAIL: _____ TELEPHONE: _____

Are you between the ages of 14 and 17? Y N Are you a dependent adult? Y N

Below, please indicate the days and times you would be able to volunteer:

Example	Mon	Tues	Wed	Thur	Fri	Sat
3-6:00 PM						

Approximately how many hours per week are you available to volunteer? _____

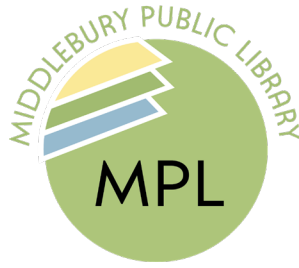
Your background information:

Volunteer experience _____

Special skills _____

Why are you interested in volunteering at the library? _____

School (if applicable) _____



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Volunteer Agreement:

I agree to abide by and comply with the behavior policies, safety, and health rules and regulations of Middlebury Public Library, including but not limited to its policy against discrimination and harassment. Additionally, I agree to conduct myself in a professional manner, consistent with the same standards as that established for library employees.

I understand that I am a volunteer, not an employee, agent or contractor of the Middlebury Public Library. I am not covered by Workers' Compensation, and I am responsible for any expenses incurred as a result of any illness or injury I sustain from volunteering.

Middlebury Public Library, its employees, volunteers, and Board of Trustees shall not be liable for any death, injury or property damage claims arising from any and all claims or causes of action that may arise out of the performance of my assigned volunteer duties. If any claim arises out of the foregoing, I shall indemnify and hold harmless the Middlebury Public Library, its employees, volunteers, and Board of Trustees.

If over the age of 18, I understand that Middlebury Public Library will conduct a background check. I hereby authorize the Middlebury Public Library to perform this background check and investigate any public records relating to my criminal history or lack thereof.

Submitting a volunteer application does not guarantee placement or engagement as a Library volunteer. Once accepted as a volunteer, an assignment can end at any time at the discretion of the volunteer coordinator or Library Director.

I hereby submit my application to be a part of the fantastic group of volunteers that support the Middlebury Public Library. I understand that I will need to attend a mandatory orientation before volunteering, and that I may need to meet a minimum commitment of hours in order to continue volunteering. I certify that all statements on this application are true and complete.

SIGNATURE: _____ DATE: _____

Parent/Legal Guardian signature for volunteers between the ages of 14 to 17 years old and for dependent adults.

Parent/Legal Guardian Name (Print): _____ DATE: _____

SIGNATURE: _____ DATE: _____

FOR LIBRARY STAFF USE ONLY

Date Received: _____ Interview Date: _____

Contacted By: _____ Orientation: _____

Background Check Required: Y N Background Check Completed: Y N