

Mobile Public Library Volunteer Application

Please complete the boxed portion of the attached background check form and return with completed application to:

Mobile Public Library Development Office
700 Government Street, Mobile, Alabama 36602

Personal Information

Name: _____ DOB: _____
 Phone (day): _____ Phone (evening): _____
 Address: _____ City: _____ ST: _____ Zip: _____
 Email: _____

Education/Skills

Education (please select highest degree earned)

- High School/GED Associate Degree Bachelor's degree

Skills: (please identify all that apply)

Computer: Microsoft Word Microsoft Excel Microsoft Publisher

Foreign Languages: _____

Other: _____

Emergency Contact

Name: _____ Relationship: _____
 Phone: _____ Alt. Phone: _____

Availability

Please indicate which days and times you are available to work.

- | | | | | | |
|------------------------------------|-----------------------------|-----------------------------|-----------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> AM | <input type="checkbox"/> PM | <input type="checkbox"/> Thursday | <input type="checkbox"/> AM | <input type="checkbox"/> PM |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> AM | <input type="checkbox"/> PM | <input type="checkbox"/> Friday | <input type="checkbox"/> AM | <input type="checkbox"/> PM |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> AM | <input type="checkbox"/> PM | <input type="checkbox"/> Saturday | <input type="checkbox"/> AM | <input type="checkbox"/> PM |

Do you prefer:

- | | |
|--|--|
| <input type="radio"/> Summer Only | <input type="radio"/> January-May |
| <input type="radio"/> September-December | <input type="radio"/> Year-round |
| <input type="radio"/> Other: _____ | <input type="radio"/> Special Projects |

Preferences

Please select the MPL location for which you would like to volunteer:

- | | |
|---|---|
| <input type="checkbox"/> Bookmobile | <input type="checkbox"/> Ben May Main Library |
| <input type="checkbox"/> Moorer/Spring Hill | <input type="checkbox"/> Parkway |
| <input type="checkbox"/> Saraland | <input type="checkbox"/> Semmes |
| <input type="checkbox"/> Toulminville | <input type="checkbox"/> Theodore Oaks |
| <input type="checkbox"/> Trinity Gardens | <input type="checkbox"/> West Regional |

Volunteer Interests:

Why do you want to volunteer at the Mobile Public Library?

What special interests and/or skills do you have that may help us to match you with the best volunteer assignment?

Have you volunteered anywhere before? If so, please tell about it.

How did you hear about this opportunity?

Library Usage:

How do you use the library?

Reference Information:

Name: _____ Phone: _____

- Personal Professional (i.e., supervisor)

Have you ever been convicted of a crime that has not been pardoned, other than a minor traffic violation? If yes, please explain.

Note: A conviction will not necessarily preclude your volunteering. This information will be used only for volunteering purposes and only to the extent permitted by applicable law.

Please read the following and sign:

I certify that the answers contained in this application are true and complete to the best of my knowledge. My volunteer service is conditional upon completion of this application and verification of my references. Once I have served 20 or more volunteer hours with the Mobile Public Library, I authorize the Mobile Public Library to obtain all information concerning convictions on myself using the attached background check form. I am offering my services as a volunteer. If my offer is accepted, I will not be entitled to compensation for any services I provide.

Signature of Applicant

Date

For Office Use Only:

Background Form Received

Date

References Verified

Date

Phone Interview Conducted

Date

Manager Notified

Date

Notes:

Decision: Accept Applicant Deny Applicant Other: