

Poughkeepsie Public Library District

93 Market Street
Poughkeepsie, NY 12601
(845) 485-3445 Fax (845) 485-3789

Volunteer Application

Please legibly print or type this application.
Submit completed application to the Administrative Office.

Personal Information

Last Name			First	Middle	Date
Street Address					Home Telephone
City, State, Zip					Business Telephone
Have you ever applied for a volunteer position with the Library District? _____ Yes _____ No					E-Mail Address
Type of volunteer position desired (<i>please refer to Volunteer Handbook</i>)					When will you be available to begin a volunteer assignment?
Apart from absence for religious reasons, are you available all year? _____ Yes _____ No					Will you volunteer weekends if asked? _____ Yes _____ No
Are you an American citizen? _____ Yes _____ No					If not, please give green card registration number:

Education

School	Name and Location	Course of Study	Years Completed	Did You Graduate	Degree
Graduate					
College					
Business/Trade					
High School					

Membership in Professional or Civic Organizations

(exclude those which may disclose your race, color, religion, or national origin)

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Volunteer History		Please give accurate, complete volunteer history. Start with your present or most recent volunteer appointment.
1	Company Name	Telephone
	Address	Volunteer Dates (month and year) From: _____ To: _____
	Name of Supervisor	
	Job Title and Responsibilities	May We Contact This Employer? _____ Yes _____ No
2	Company Name	Telephone
	Address	Volunteer Dates (month and year) From: _____ To: _____
	Name of Supervisor	
	Job Title and Responsibilities	May We Contact This Employer? _____ Yes _____ No
3	Company Name	Telephone
	Address	Volunteer Dates (month and year) From: _____ To: _____
	Name of Supervisor	
	Job Title and Responsibilities	May We Contact This Employer? _____ Yes _____ No

Only Answer The Questions That Apply		
	Name of high school or college you currently attend	Telephone
	Address	Years remaining
	List the computer software with which you have a good, working knowledge:	
	Name, Address and Telephone Number of two people, other than relatives, who know most about your qualifications and work: 1. 2.	

Signature
<p>The information provided in this Volunteer Application is true, correct, and complete. If appointed, any misstatement or omission of fact on this application may result in my immediate dismissal.</p> <p>I understand that acceptance of volunteer appointment does not create a contractual obligation upon the Library District to continue in the future. I also understand that my appointment is subject to periodic review.</p> <p style="text-align: center;"> _____ _____ Date Signature </p>

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Reference Check		
1	Person Contacted	Results
2	Person Contacted	Results
3	Person Contacted	Results

Interview Comments		
	Interviewer	Comments

Revised May 2010