



**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? <input type="checkbox"/> Yes <input type="checkbox"/> No					E-Mail Address
Type of volunteer position desired ( <i>please refer to Volunteer Guidelines</i> )					When will you be available to begin a volunteer assignment?
Apart from absence for religious reasons, are you available all year? <input type="checkbox"/> Yes <input type="checkbox"/> No					Will you volunteer weekends if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you an American citizen? <input type="checkbox"/> Yes <input type="checkbox"/> 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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<b>Volunteer History</b>		Please give accurate, complete volunteer history. Start with your present or most recent volunteer appointment.
<b>1</b>	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
<b>2</b>	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
<b>3</b>	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 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;"> <span style="margin-right: 200px;">_____</span> <span>_____</span>  Date Signature </p>

**THIS PAGE FOR LIBRARY DISTRICT USE ONLY**

<b>Reference Check</b>		
<b>1</b>	Person Contacted	Results
<b>2</b>	Person Contacted	Results
<b>3</b>	Person Contacted	Results

<b>Interview Comments</b>		
	Interviewer	Comments

*Revised November 2025*