

Sioux Center Public Library  
Volunteer Application

Name (last) \_\_\_\_\_ (first) \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ Age: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_

Email Address:: \_\_\_\_\_

Library Card #: \_\_\_\_\_

**Areas of interest and skills:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reference:**

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Availability:**

\_\_\_\_\_ Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Day of week \_\_\_\_\_ hours

I would be interested in volunteering on an ongoing basis: \_\_\_\_\_

I would like to volunteer until \_\_\_\_\_ (date) at \_\_\_\_\_ hours per week.