

# **Lewiston PUBLIC LIBRARY**

## **Volunteer Application**

Lewiston Public Library • 200 Lisbon St • Lewiston ME 04240 • (207) 513-3004 • [lplonline.org](http://lplonline.org)

### ➤ **General Information**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Reason for volunteering:**

☐ School Requirement   ☐ Court-mandated Service   ☐ Other \_\_\_\_\_

➤ Required number of hours? If so, how many? \_\_\_\_\_

**If student:**

Name of school/college: \_\_\_\_\_

Grade/Year: \_\_\_\_\_

#### **Volunteer Interests**

☐ Organizing Books

☐ Teaching/Tutoring

☐ Assisting with Events

☐ Summer Opportunities

☐ Children's Department

☐ Other:

☐ Computers/Technology

\_\_\_\_\_

#### **What days are you available to volunteer?**

☐ Monday

☐ Thursday

☐ Tuesday

☐ Friday

☐ Wednesday

☐ Saturday

#### **What time of day?**

☐ Morning

☐ Afternoon

☐ Evening

#### **Number of hours/week?**

*2-hr min. for volunteers 18+*

#### **Comments, Questions?**

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### ➤ Emergency Contact Information

**Name** \_\_\_\_\_

**Daytime Phone** \_\_\_\_\_ **Evening Phone** \_\_\_\_\_

### ➤ For Volunteers 18 and Older

If you are asked to volunteer, the City will require a background check and will require that you view a video on harassment in the workplace.

**Signature**

**Date**

### ➤ For Volunteers 17 and Younger

**To be signed by parent or guardian. \_\_\_\_\_ has my permission to volunteer at the Lewiston Public Library.**

Signature \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Name (printed) \_\_\_\_\_

Date \_\_\_\_\_ Phone \_\_\_\_\_

**For Staff Use Only**

Please return to \_\_\_\_\_