

VOLUNTEER APPLICATION



Drayton Valley Libraries
Imagine ~ Engage ~ Explore ~ Discover!

Date of Application:

Name:		
Address:	Town:	Post Code:
Home Phone:	Cell Phone:	
e-mail:		
Emergency Contact Name:	Relationship:	
Emergency Contact Phone:	Alternate Phone:	

Volunteer tasks are assigned following consultation with the individual volunteer according to their abilities as well as their area of expertise or interest under the following categories: Operations / Programs / Leadership.

Areas of interest for Volunteer activities (training will be provided):

Operation Volunteers

- **Collection Maintenance** (process donates, sort material, prep items for collections or book-sales)
- **Housekeeping** (dusting, cleaning, plant care, tidy or arrange space)
- **Other:**

Program Volunteers

- **Performer / Presenter**
- **Program Prep** (craft materials, arrange activity areas, etc.)
- **Program Assistant** (guide or direct small group activity)
- **Summer Reading Programs**

Leadership Volunteers

- **Board Trustee** (Governance)
- **Library Friends** (Fundraising)
- **Advocacy** (PR, Marketing)
- **Strategic Planning** (canvassing, note-taking, data-gathering)
- **Other:**

Volunteers under 16 years old must gain parental consent and signature: See page 2 of this form

Program Volunteers may be required to provide an **RCMP Criminal Record Check**. Volunteer activities involving children also require a **Vulnerable Sector Check**. Are you willing to provide security checks? **Yes No**

Do you have Library work experience?	Yes	No	How many years/ months?
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In what capacity?

How frequently will you be available to volunteer?	Daily	Weekly	Occasionally
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Will you be available on a regular schedule?	Yes	No	If YES , please indicate days/ times (Enter times only under those days that you are available)
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Weekday (Library hours)	Monday (9:00am-9:00pm)	Tuesday (9:00am-9:00pm)	Wednesday (9:00am-9:00pm)	Thursday (9:00am-9:00pm)	Friday (9:00am-5:00pm)	Saturday (12:00am-4:00pm)
Time						

Do you have a specific number of volunteer hours to complete? School / Court / Other:	# Hours:	Deadline:
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Do you have any physical limitations? Specify:	Yes	No	**You do not have to answer this question; it is included only for administrative purposes to ensure that task assignments are appropriate and do not put you, or others, at risk.
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What are your expectations or goals from Volunteering:

Volunteer Agreement Waiver

This agreement forms part of and must be attached to the Volunteer Application form. Before you start volunteering, Drayton Valley Libraries requires your agreement to the following:

- I understand that Drayton Valley Libraries has a volunteer screening process and that I may be asked to undergo an interview, orientation, reference check and / or criminal record and child abuse registry check depending on the nature of the volunteer position for which I am applying.
- I understand that my Volunteer work is a commitment. I will notify Library Staff as soon as possible if / when I cannot attend a scheduled shift or if I am unable or unwilling to continue as a volunteer with Drayton Valley Libraries.
- I accept that Library administration reserves the right to suspend my activities if the work is unsafe or unsatisfactory.
- I understand that I am responsible for conducting safe work practices, to not engage in activities where harm may come to me or any person in the Library, and to notify Library Staff immediately if potential hazards are observed.
- I grant permission to Drayton Valley Libraries to use my name, any photo or video images of me and any comments made by me in writing or otherwise, for promotional purposes in any form of media (TV, radio, print, web-based).
- I understand that confidentiality is fundamental to Library operations and I will be sensitive to the protection of privacy for Library patrons, program attendees or details learned during my volunteer activities that may reveal personal information or identity. By signing below, I am indicating that I will not use or disclose to any third party any information without the prior written consent of the Library administration.
- I understand that I am representing Drayton Valley Libraries as volunteer and I agree to act in a professional manner. I acknowledge and will abide by the Drayton Valley Libraries' Code of Conduct at all times while conducting volunteer activities.
- I hereby release and discharge Drayton Valley Libraries, its agents, employees and trustees from any claim or action that I may have with respect to the use of any of the above or my participation in any related activities while volunteering for the Library.

Volunteer Signature:

Date:

Parental Consent for Volunteers Under 16 Years Old

My signature authorizes and acknowledges the following:

- I am the parent or legal guardian of the Volunteer applicant and that the applicant is older than 14 years of age.
- I have read and discussed the content of the Volunteer Agreement with my child.

Parent/ Guardian Signature:

Date:

For Library Administration Use Only

Interviewed By:

Interview Date:

Library Branch for Volunteer activity: **Main Branch / Rotary Branch**

Nature of Application: **Personal / Student / Community Service / Work Experience / Library Introduction**

Strengths:

Task Interests/ Assignments:

Start Date:

Scheduling:

Notes: