

Chillicothe & Ross County Public Library

Adult Volunteer Application

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Full Name:				Date:				
	Last	First			M.I.			
Address:								
	Street Address					2	Apartment/U	Init #
	City				State		ZIP Code	
Phone:			Email					
Days & Time Available:	e □Mon□am [□pm	□ Tues □ am □ □ □ pm	Wed □ am □ □ pm	□Thurs	□ am □ pm	□ Fri □ ar □ p:		□ am □ pm
Select Location:	□ Main □ Fran □ S. Salem	kfort □ Kingston	□ Mt. Logan	□ No:	rthside	□ Paxton	□ Richm	nond Dale
Why are yo	u interested in volunte	eering at the library	?					
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Have you e	ver worked for the libi	cary? [If yes, wh	ien?				
Have you ev	ver worked for the lib	·	If yes, where the second secon	ien?				
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