

**ADULT VOLUNTEER APPLICATION**

*(Please note: Both sides of the application must be completed in full. Individuals under the age of 18 should seek volunteer opportunities through the library's Young Adult Department by visiting [carmelclaylibrary.org/teen-volunteer-corps](http://carmelclaylibrary.org/teen-volunteer-corps).)*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

What is your educational background?

- High school
- Vocational school                      Area(s) of study \_\_\_\_\_
- College                                      Area(s) of study \_\_\_\_\_
- Graduate school                      Area(s) of study \_\_\_\_\_
- Other (Please specify) \_\_\_\_\_

What interests you about volunteering at the library? \_\_\_\_\_  
\_\_\_\_\_

How often would you like to volunteer? \_\_\_\_\_

Days and times preferred \_\_\_\_\_

Days and times you are NOT available \_\_\_\_\_

Which of the following duties might you be interested in performing for the library?

- Staffing the Foundation Friends Bookstore (cashiering, helping customers, restocking book displays)
- Sorting donated books for bookstore/book sales
- Processing online sales of donated books to raise money for the Foundation Friends
- Preparing discarded library materials for book sales
- Mending library materials (loose pages, binding, etc.)
- Straightening bookshelves, dusting
- Stuffing envelopes for bulk mailings
- Other (Please specify) \_\_\_\_\_

Please give the **dates** and **location** of prior employment during the last 10 years and describe your **responsibilities** (if you prefer, you may attach a copy of your resume):

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

Please list the dates and location of prior volunteer experience and/or professional/civic activities:

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Please indicate any specific skills, training, or experience you have related to volunteering at the library:

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Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Depending on the nature and length of your volunteer assignment, the library may conduct reference and other background checks on you.**

References (name, address, and telephone) \_\_\_\_\_

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**Emergency Contact:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

**Agreement and Release:**

As a CCPL volunteer, I understand that I am a representative of the library and a partner in fulfilling its mission. In accepting this role, I understand and agree that I am not an employee of the library and will not receive compensation for my services. I agree to abide by the library's policies, procedures, and rules and to participate in any required orientation or training programs required for my volunteer position. I hereby release the library and its officers, employees, agents, and representatives from any responsibility for personal injury and damage to or loss of property that I may incur while engaging in volunteer activities at or on behalf of the library.

\_\_\_\_\_  
Volunteer's signature

\_\_\_\_\_  
Date

**Thank you for your interest! Please return your completed application to the Human Resources Manager at the Carmel Clay Public Library, 425 E Main St, Carmel, IN 46032. Due to the limited need for adult volunteers within the library, please be advised that we may not contact you for several weeks.**