



Volunteer Application Form

Name _____ Phone: _____ Date: _____

Address _____ City _____ State _____ ZIP _____

Email _____

LOCATIONS AT WHICH YOU WOULD LIKE TO WORK

Main _____ Alzheimer _____ Redfield _____ Watson Chapel _____ White Hall _____

KIND OF WORK WHICH YOU WOULD ENJOY

- _____ CLERICAL – such as: filing, reviewing print materials for damage, data entry
- _____ MANUAL – such as: stamping magazines, copying/mounting materials, grounds work
- _____ ACTIVE – such as: shelving and straightening books, light gardening
- _____ WORKING WITH PEOPLE – such as: assisting with summer reading, stem projects, tutor
- _____ CREATIVE – such as: assisting with displays and bulletin boards
- _____ Other – Explain: _____

Howa many hours are you willing to work? _____ Weekly? _____ or Monthly? _____
If you trying to meet a service requirement *for school*, # hours are required? _____

Day available:	Times available:
<input type="radio"/> Monday	
<input type="radio"/> Tuesday	
<input type="radio"/> Wednesday	
<input type="radio"/> Thursday	
<input type="radio"/> Friday	
<input type="radio"/> Saturday	

Why do you want to volunteer at the library? _____

Please list 2 references (co-workers, teachers, neighbors, coaches)

1. Name: _____ Phone #: _____
2. Name: _____ Phone #: _____

Signature _____ Date: _____

If you are under 16, please have your parent sign below:

_____, give permission for my son/daughter _____ to volunteer at the
PBJC Library Parent's signature _____ Phone: _____

600 S. Main St
Pine Bluff, AR 71601
Phone: 534-4802
Fax: 870-534-8707



VOLUNTEER AGREEMENT

By signing below, I hereby accept a position as a Volunteer for the Pine Bluff/Jefferson County Library upon the following terms, conditions, and undertakings:

TERMS AND CONDITIONS

1. My services to the Pine Bluff/Jefferson County Library are provided strictly in a volunteer capacity as a Volunteer and without an express or implied promise of salary, compensation, or other payment of any kind whatsoever.
2. My services are furnished without any employment-type benefits, including employment insurance programs, worker's compensation accrual in any form, vacations, or sick time.
3. I will familiarize myself and comply with the Pine Bluff/Jefferson County Library policies and procedures applicable to Volunteers. I understand that the Pine Bluff/Jefferson County Library, without notice or hearing, may terminate my services as a Volunteer at any time, with or without reason.

RELEASE

1. For the opportunity to participate as a Volunteer I hereby release the Pine Bluff/Jefferson County Library, its employees, elected and appointed official from any and all liability for any injury to me or damage to my property which may result from my participation in the capacity of a Volunteer. This release shall be binding on me and any other persons making claim through me or on my behalf.
2. On behalf of myself and my heirs, personal representatives, and assigns, I hereby release, discharge, indemnify, and hold harmless the Pine Bluff/Jefferson County Library and its directors, officers, employees, and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my Volunteer activities on behalf of the Pine Bluff/Jefferson County Library.
3. I hereby acknowledge that I have read, understood, and voluntarily agreed to the foregoing waiver and release agreement.

Print Name: _____

Signature: _____

Date: _____