



# VOLUNTEER APPLICATION

PLEASE NOTE: Volunteering at the Highland City Library CANNOT be used for court-appointed community service hours.

**LIBRARY VOLUNTEERS MUST BE 14 YEARS OF AGE OR OLDER**  
**VOLUNTEERS UNDER 18 YEARS OF AGE MUST HAVE PERMISSION OF PARENT/GUARDIAN**  
**SORRY, THE LIBRARY CANNOT ACCEPT COURT ORDER COMMUNITY SERVICE VOUNTEERS**

Name \_\_\_\_\_

Birthday \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Please share why you are interested in volunteering at the library.

Previous volunteer experience: \_\_\_\_\_

**Please mark days/times you are available. On Friday and Saturday the library closes at 4 p.m.**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
10:00 – 11:00						
11:00 – 12:00						
12:00 – 1:00						
1:00 – 2:00						
2:00 – 3:00						
3:00 – 4:00						
4:00 – 5:00						
5:00 – 6:00						
6:00 – 7:00						
7:00 – 8:00						

Notes about your schedule \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_

E-mail address \_\_\_\_\_

**I verify that all the above information is correct.**

**Signature** \_\_\_\_\_

**Signature of Parent/Guardian (for minors)** \_\_\_\_\_

Please return form to library or email to [librarydirector@highlandut.gov](mailto:librarydirector@highlandut.gov).