

Hauppauge Public Library **Adult** Volunteer Application (Over the age of 18yrs)

Please return application to: Hauppauge Public Library (Attention: Catherine Berntsen)

1373 Veterans Memorial Highway, Suite 1, Hauppauge, NY 11788

PERSONAL INFORMATION

Name _____

Email _____

Address _____ Apt. # _____

City _____ State _____ Zip Code _____

Telephone (Home) _____ Telephone (Cell) _____

REASONS FOR VOLUNTEERING

What is your reason for wishing to volunteer at the Hauppauge Public Library?

Are you applying as a volunteer to complete court-ordered community service? Yes No

If yes, how many hours do you need to complete? _____

REFERENCES Please provide us with one professional reference.

(Current/previous employer, supervisor of another volunteer position you held, etc. Just cannot be a family member.)

Name: _____

Telephone: _____ Email: _____

TERMS AND CONDITIONS

I authorize the Hauppauge Public Library to make inquiries as to my experience and character, and to certify that all statements made on this application are true. In addition to providing a reference, I am aware that the Library may run an official background check.

I understand that the Hauppauge Public Library is counting on my services. If I fail to appear for assigned work days without prior arrangement with my supervisor, or if my work or the volunteer arrangement is unsatisfactory in any way, I understand that my volunteer service may be terminated.

I understand that the application for volunteer work and/or the number of hours I requested on this application are not guaranteed to be fulfilled. Duties and tasks may not always be available or needed by the Library, or may be filled at the moment.

I agree that I will not disclose any information relating to library guests, library business operations, or library personnel gathered or heard officially or unofficially in the course of my volunteer service. I understand that such information is strictly confidential.

I understand that there is no monetary compensation for volunteer services at the Hauppauge Public Library.

Signature: _____ Date: _____

We will be in touch with you to schedule a meeting so we can discuss your interests further. Thank you!

VOLUNTEER SUPERVISOR USE ONLY

Interview Date: _____ Interviewed by: _____ Start Date: _____