



## Barberton Public Library Volunteer Application

Today's date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Days and times available: \_\_\_\_\_

Date you are available to start volunteering: \_\_\_\_\_

What department would you like to help with? Check all that apply. (Please note, volunteers will not always be needed in all areas.)

Main Floor \_\_\_ Children's Floor \_\_\_ Technical Services \_\_\_  
Maintenance \_\_\_

Education: \_\_\_\_\_

Work experience: \_\_\_\_\_

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

Volunteer experience: \_\_\_\_\_

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

Club or organization affiliations: \_\_\_\_\_

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

Interests, hobbies, skills: \_\_\_\_\_

**Barberton Public Library / 602 West Park Avenue / Barberton, OH 44203**  
**(330) 745 – 1194 [www.barbertonlibrary.org](http://www.barbertonlibrary.org)**

What prompted you to ask about volunteering at the library? \_\_\_\_\_

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**Please note that for applicants over the age of 18 there will be a required criminal background check (conducted at the library's expense) which must be completed before your first day of volunteer service.**

### **For Applicants Under 18 Years of Age**

#### **Parental Permission for Volunteers**

Dear Parent or Guardian:

By returning this application to the Library, your teen is volunteering to help in the Barberton Public Library. Volunteers are unpaid and can assist in performing specific duties. Training will be provided by staff members who will help your teen learn about job responsibilities in return for his/her gift of time and energy to this organization. Teens will be assigned to tasks as appropriate as possible considering age and ability. Please sign below if you wish to allow your teen to assist the Library.

Parent/Guardian Signature: \_\_\_\_\_

Date

Parent/Guardian Name (printed): \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_

Parent/Guardian Telephone: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_\_