

FARGO PUBLIC LIBRARY
VOLUNTEER APPLICATION
(Applicants must be 18 or older)

**THANK YOU FOR YOUR INTEREST IN BECOMING AN FPL VOLUNTEER. WE
ACCEPT APPLICATIONS AT ANY TIME, BUT INTERVIEW AND TRAIN
ONLY WHEN THERE IS AN IMMEDIATE VOLUNTEER OPPORTUNITY.**

Name _____ Date _____

Phone _____ Email _____

Address _____ City _____ State _____ Zip _____

Emergency Contact _____ Relationship _____ Phone _____

Please list one non-family reference we may contact:

Name _____ Relationship _____ Phone _____

Please be aware that some volunteer positions at the library require a background check.

Are you willing to sign an inquiry release form?

Yes No

1. What type of volunteer work interests you? (Check all that apply.)

Shelving

Outreach - delivering to homes and/or outreach sites (*weekdays 9-5 only*)

Outdoor Garden Volunteer **spring/summer only*

Indoor Plant Volunteer

Other

2. When are you interested in volunteering? (Check all that apply.)

Mornings

Afternoons

Evenings (Shelving only)

Weekends (Shelving only)

OFFICE USE ONLY	
Rcvd _____	Contact _____
Scheduled _____	
Fic _____	Non-fic _____

3. The main reason I would like to volunteer is:

I want to volunteer my time

To satisfy academic/organizational service requirement

Name of organization

of hours required

To fulfill court-ordered community service

Other

4. We request a minimum time commitment of one year. Is there any reason you might not be able to commit to a minimum of 1 year of service?

5. What is your educational background?

6. What is your current employment status?

If unemployed, are you seeking employment? Yes No

7. Do you possess a valid driver's license and reliable vehicle? Yes No N/A
(Required for Outreach)

8. List any current and/or previous volunteer commitments and length of service.

9. Can you easily bend, reach, stoop and grasp? Can you lift 40 pounds? Can you push a 100-pound wheeled cart? Yes No

10. Have you ever been convicted of a criminal offense? Yes No

If yes, please specify.