Library Volunteer Application

Date:			Birt	th Month	n:Da	y:	
Name:							
Address:							
City/State/Zip:							
			Phone (evening):				
Email address:	<u> </u>						
				Phone:			
Education:							
High School/G	ED:						
College/Unive	rsity:						
Name, Locatio	n, Degre	es/Area	s of Study:				
Work Experien	ce:						
Skills							
Computers:	Excel	Word	Windows	Mac	Google Chrome	Microsoft Edge	
•					Coogle Cilionio	Thorodore Edgo	
Other compate	ei skills.						
Other Skills an	d intere	sts:					

Preferred days:				
Monday	Wednesday	Friday		
Tuesday	Thursday	Saturday		
Times Available:				
Morning from	to			
Afternoon from	to			
Availability:				
Regular (weekly, bi-we	ekly) Times/Sea	Times/Seasons not available:		
Trained substitute				
Special projects(s)				
Areas of Interest: (please ch	eck)			
Sorting room	Greeter	Processing		
Shelving	Children's multi-purpose	On-call, special events		
Computer volunteer	Genealogy	Other		
How did you learn about the (Check as many choices as a	Baxter County Library Volunt	eer Program?		
Library website	Library staff	Other		
Library newsletter	-			
Friends of the Library	Volunteer Fair			
Library newsletter Friends of the Library Why are you interested in vo	Library volunteer Volunteer Fair Plunteering at the library?			

Thank you for your interest in the Library volunteer program! We will contact you soon.

Charlene Smith, Volunteer Coordinator

870-580-0976 charlene.s@baxlib.org

Would you like to join the Friends of the Library? (\$5 annual dues)

____Yes ____No