

# BURLINGTON PUBLIC LIBRARY

## Volunteer Application

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
Last first middle

HOME ADDRESS \_\_\_\_\_  
\_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

EDUCATION (highest level completed) \_\_\_\_\_

PREVIOUS VOLUNTEER EXPERIENCE \_\_\_\_\_

SKILLS, SPECIAL INTERESTS \_\_\_\_\_

PHYSICAL LIMITATIONS (for some jobs) \_\_\_\_\_

CHARACTER REFERENCE \_\_\_\_\_ PHONE \_\_\_\_\_

AVAILABILITY for VOLUNTEER WORK: Days of the week \_\_\_\_\_

Time of day \_\_\_\_\_

Standard vacations \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PARENT'S/GUARDIAN'S SIGNATURE \_\_\_\_\_  
(for students through grade 12)

Please return this form to:

Marnie Smith, Assistant Director  
Burlington Public Library  
22 Sears Street  
Burlington, MA 01803

[msmith@burlington.org](mailto:msmith@burlington.org)