



“Never doubt that a small group of thoughtful, committed citizens can change the world;

indeed, it's the only thing that ever has. “

Margaret Mead

VOLUNTEER/COMMUNITY SERVICE APPLICATION

Barrington Public Library
281 County Rd.
Barrington, RI 02806
401-247-1920
barringtonlibrary.org

Thank you for your interest in volunteering at Barrington Public Library. Please fill out the application below and scan and send to director@barringtonlibrary.org or mail or deliver to the library.

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____

Emergency Contact: _____ Phone: _____

Are you required to do Community Service to satisfy a school requirement? YES NO

If yes, by whom? _____ Hours: _____ Deadline: _____

Are you required to do Community Service to satisfy a court order? YES NO

If yes, by whom? _____ Hours: _____ Deadline: _____

Have you ever been convicted of a crime? If yes, please explain:

How many hours a week are you willing to volunteer? _____

Days and hours you are available to volunteer: (circle all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday

Special skills : _____

Areas of interest: _____

Previous volunteer experience: _____

Previous job experience: _____

Highest level of education completed: _____

Do you have any health-related restrictions or physical limitations that might affect the work that you can do? If yes, please explain:

References:

I understand that I am not entering into an employment relationship with Barrington Public Library and that I am not entitled to receive a salary or any employee benefits, including workers' compensation. I understand that either the Library or I may terminate this volunteer relationship at any time without notice.

I understand that I must respect the confidentiality of any information about library users, and I agree that I will not disclose any such information.

Signature: _____ Date: _____

If under 18, parent or guardian must sign:

I hereby give permission for my teen to volunteer at the Library.

Parent's Signature: _____ Date: _____