SCHLOW CENTRE REGION LIBRARY
VOLUNTEER APPLICATION FORM
(All permanent placed library volunteers must be at least 16 years of age and willing to commit to a minimum of 6 months)

Name____________________________________               Date_____________________

Address___________________________________________________________________

Phone Number______________________________

Email Address______________________________________________________________

Please list any previous volunteer or work experience. Specifically include any experience that would be relevant to library work.

1. Job/Position_____________________________________     Date__________________
   Employer_______________________________________

2. Job/Position_____________________________________      Date__________________
   Employer_______________________________________

Have you lived within Pennsylvania continuously for the past 10 years? Yes___   No___
(Volunteers living outside of PA in the last 10 years are required to submit an additional FBI fingerprint clearance)

Education and/or Training____________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Please list any special skills or knowledge that you feel would be beneficial to the library (for example: any specific computer skills)___________________________________________
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Why would you like to volunteer at Schlow Centre Region Library?____________
____________________________________________________________________________
What days and times are you available to work?

Monday____________________________________________________________
Tuesday____________________________________________________________
Wednesday__________________________________________________________
Thursday____________________________________________________________
Friday_______________________________________________________________
Saturday/Sunday ______________________________________________________

The following background checks are required of all library personnel 18 years of age and over, including volunteers. You are responsible for providing both documents within 30 days of the start of your volunteer assignment (both are good for 3 years):

1) Criminal Background Check, through the PA State Police: 
https://epatch.state.pa.us/TandCVolunteerAction.do

2) Child Abuse History Clearance, through the PA Department of Child Welfare:
https://www.compass.state.pa.us/cwis/public/home

Volunteers under 18 years of age must submit a Parent/Guardian Consent Form with this application

Please list two references below along with their contact information:

1. Name____________________________________________________________
   Telephone or email address___________________________________________
   Relationship to you__________________________________________________

2. Name_____________________________________________________________
   Telephone or email address____________________________________________
   Relationship to you__________________________________________________

Applicant Signature___________________________________________________