



OAK PARK

Public Library

834 Lake Street, Oak Park, Illinois 60301

Volunteer Application

Name	Last	First		
Contact #	This is my <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Other _____ telephone ()		This is my <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Other _____ telephone ()	
Address	Street Address	City	State	Zip
Email				
Age	<input type="checkbox"/> Minor (under age 18) <input type="checkbox"/> Adult (age 18+)			

Why do you want to volunteer at the Library?

What types of volunteer responsibilities would you prefer?
<input type="checkbox"/> Putting books in order <input type="checkbox"/> Finding books from a list <input type="checkbox"/> Assisting others on computers <input type="checkbox"/> Repairing books <input type="checkbox"/> Copying and folding <input type="checkbox"/> Making home deliveries <input type="checkbox"/> Cleaning book covers <input type="checkbox"/> Cutting paper <input type="checkbox"/> Assisting with library events <input type="checkbox"/> Boxing sale books <input type="checkbox"/> Share tech skills/trends <input type="checkbox"/> Distributing posters to businesses

Time Commitment/Frequency	# of Hours per Week
<input type="checkbox"/> Short term (less than 2 mos.)	<input type="checkbox"/> 1-2 hours per week
<input type="checkbox"/> Long term (more than 2 mos.)	<input type="checkbox"/> 3-4 hours per week
<input type="checkbox"/> Regular weekly schedule	<input type="checkbox"/> 5-6 hours per week
<input type="checkbox"/> Sporadically/Events only	<input type="checkbox"/> more

When are you available to volunteer at the Library?	Day	Hours
	Monday	
	Tuesday	
	Wednesday	
	Thursday	
	Friday	

