

FORD CITY PUBLIC LIBRARY
VOLUNTEER INFORMATION AND AGREEMENT

Name _____ Date _____

Address _____

Home Phone _____ Cell Phone _____

Birthday _____ Email _____

Emergency Contact

Name _____ Relationship _____

Phone _____

Do you have any medical conditions (including allergies) we should be aware of?

What skills, training or knowledge do you wish to share with the Library? (Please include any computer or language skills, as well as other skill such as working with children, older adults, etc. Attach sheet or write on back, if needed.)

Are you volunteering as a requirement of a public service or school program? If yes, please list the service and contact information for your representative at that service.

List available timeframes per day below (i.e., Wednesday "12pm to 2pm")

Monday: _____ Tuesday: _____ Wednesday: _____

Thursday: _____ Friday: _____ Saturday: _____

All Volunteers ages 18 and over must submit a current (within 5 years) PA Child Abuse History Clearance and PA State Police Criminal Record History Clearance. Any volunteer wishing to work directly with children must provide current (within five years) state police and child abuse background checks.

Thank you for your interest in volunteering at Ford City Public Library. If you are accepted into our community service program at the library, we have several requirements that we ask of you:

1. **Be prompt.** *Come on time when you are scheduled to work. If you are unable to come, please call the library.*
2. **Come prepared to work.** *Be ready and willing to do any job that is asked of you.*
3. **Dress appropriately.** *Wear clean, presentable clothing, shoes, etc. Dress appropriately and modestly. We do not have an official dress code, but try to look more like you are going to work than to the beach.*
4. **Be courteous.** *Be nice to our customers and our staff with your voice, tone and mannerisms. Refer all patrons to either the Director or Library Staff for assistance.*
5. **Ask questions.** *Always ask questions when you don't completely understand the tasks assigned. We would much prefer to answer questions at first than have to redo work done incorrectly.*

I have read and agree to fully abide by the requirements listed within this application.

I certify that the statements made in the volunteer application are true and correct and have been given voluntarily. I understand misrepresentation of any information may result in termination of my volunteer involvement. I am volunteering for personal reasons. I understand I will not be paid for my services as a volunteer and expect no compensation.

Should I become a volunteer, I agree:

- To comply with the rules and regulations of Ford City Public Library.
- To perform my volunteer duties to the best of my ability and act at all times as a member of the team.
- To meet time and duty requirement, or provide adequate notice and attempt to arrange for alternative arrangements.
- Ford City Public Library may use interviews, photographs, or video of myself (or my child) for promotional and educational purposes in the media.

I understand that:

- Under no circumstances am I to discuss any information relating to patron use of the library including but not limited to what library services an individual uses; what items a patron reads or checks out; any patron conversations overheard in the library; any information contained in any patron’s library record.
- Even if I am asked about the above behaviors by law enforcement or other authority figures, I am not able to provide any such confidential information without a subpoena or search warrant; and, that in the event of such a request, I should notify the Library Director or present supervisor who will take appropriate action.
- In accordance with Pennsylvania law, minor patrons are given the same rights to privacy as adults. Therefore, I will not discuss library use by minor patrons with anyone, including my parents/guardians, without the permission of said minor.

I hereby agree to release, waive, and discharge FCPL from any and all claims or liabilities resulting from my volunteer services. I hereby agree not to institute or assist in any action or suit at law or in equity against Ford City Borough, Ford City Public Library, its officers, employees, agents, or otherwise, for compensation, damage, loss or injury either to person or property, or both arising out of volunteer services. Applications for minors will only be accepted with a parent’s signature (minimum age of 13 or entering 7th grade).

Signature of Volunteer Applicant Date

For minor volunteer applicants only:

By signing below, I claim responsibility for _____ (child’s name) and hereby release Ford City Borough, the Ford City Public Library, and their employees from any and all liability which may arise as a result of volunteering at the library. My child has my full permission to participate in the library’s volunteer program and I waive any claim for damages to his/her property and assume all the risks of such participation.

Signature of Parent/Guardian if applicant is under age 18 Date

Phone number where parent/guardian can be reach during the child’s volunteer hours