

Lower Umpqua Library District

395 Winchester Avenue Reedsport, OR 97467 541-271-3500 luld.org

Library Volunteer Application/Registration Form

Submit to: Lower Umpqua Library

Last (Full legal name)	First	MI				
Address: Street	City	State/Zip code				
Telephone: Home	Work	Cell				
Email address:						
Driver's license number:	R	Renewal date				
Have you ever had a traffic violation	[] Yes	[] No				
Have you ever been convicted of a cri	me [] Yes	[] No				
If yes, please explain:(Conviction will not necessarily disqu	alify an applicant fron	n volunteering)				
Are you currently volunteering elsewl	nere? If so, where?					
If you have a disability and require ac indicate the needed accommodations:	commodations to perfe	orm your volunteer assignment, please				
Emergency contact: Name		Phone number				
Brief biographical sketch:						

Please indicate weekly availability by filling the appropriate boxes:

1	0	11	No	oon	1	,	2	3	4	. ;	5	_6
Tue												
Wed												
Thu												
Fri												
Sat												

If you are planning to volunteer for a limited or recurring period, please list the appropriate dates/months/seasons/years:

Please indicate the types of activities you would be able and willing to do as a volunteer:

Requir	es learning Dewey Decimal numbers and our call number system: Shelving books Cataloguing/inventorying books (comparing books on shelves to a printed list)			
Requir	es care and attention to detail:			
	Putting stickers on books or other materials			
	Protecting/repairing books with tape, contact paper, mylar covers, or glue			
	Writing dates or barcode numbers on books/discs			
	Straightening books on shelves			
	Dusting or cleaning windows			
	Outdoor maintenance (e.g. weeding or landscaping)			
	Restocking and rotating books in our Neighborhood Libraries (requires a vehicle)			
Major	projects:			
	Managing or improving our website and Facebook page			
	Scanning, preserving, and organizing historical documents			
	Reading for children's story time (requires a background check)			
	Helping with Summer Reading Program (requires a background check)			
	Giving presentations or teaching classes			

If you have any other skills or ideas for activities that you think would be helpful to the library, feel free to list them below:

I understand as a Lower Umpqua Library District volunteer, I serve under the direction of the Library Director and staff. I may terminate the volunteer relationship at any time, for any reason. I hereby authorize the Lower Umpqua Library District to contact any source to verify and obtain information in assessing my qualifications, including but not limited to, past/present employment, motor vehicle agencies, and law enforcement agencies, and hereby release all persons, whomsoever, from any legal liability for furnishing said information. I understand that refusing to consent to a criminal history check; my application will receive no further consideration. I certify that there are no misrepresentations or falsifications on this application, and I am aware that any false statements may cause disqualification of my application.

Code of Ethics

As a volunteer, I realize that I am subject to a code of ethics similar to that which binds the professionals in the field in which I work. Like them, I assume certain responsibilities and am expected to uphold the following.

- 1. I will keep confidential matters confidential.
- 2. I interpret "volunteer" to mean that I have agreed to work for no compensation.

Having been accepted as a volunteer worker, I am expected to work according to standards as any other professional.

- 1. I promise to bring to my work site, an attitude of open-mindedness, and a willingness to be trained.
- 2. I believe that I have an obligation to my work station, to those who direct it, to my colleagues, and to those for whom we serve to maintain a professional attitude.

Confidentiality

Confidentiality is the preservation of information disclosed in a professional relationship. The nature of your duties as a volunteer may bring you into contact with a number of community members on a very personal basis. You may become aware of information relating to their financial resources, medical background or family problems. All information regarding community members, including who they are, and any information about their status and particular problems, is absolutely confidential. Breach of confidentiality will lead to immediate dismissal as a volunteer with the Lower Umpqua Library District.

My signature below certifies that I have read the material above. I understand the information provided and agree to abide by the Code of Ethics and Confidentiality described in this document.

Waiver:

I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages or injuries I may incur while volunteering for the Lower Umpqua Library District, its employees, officers, or agents.

Signature of volunteer	Date	_