Watsonville Public Library Volunteer Application

Please print clearly and complete both sides of this form.

Completion of the volunteer program application does not guarantee placement or engagement as a City of Watsonville volunteer program participant. Qualified volunteer applicants are considered without regard to race, color, religion, gender, national origin, age, sexual orientation, marital status, and non-job related medical condition or disability. For more information please call (831) 768-3400.

Name: ________________________________________  Today’s Date: ____________________________
Address: __________________________________________  City: ________________________  Zip Code: ___________
Primary Phone: (___)_______________________________  This is a ☐ Home  ☐ Work  ☐ Cell  ☐ Texts Ok
Alternate Phone: (___)_______________________________  This is a ☐ Home  ☐ Work  ☐ Cell  ☐ Texts Ok
Email Address: ____________________________________________________________

Emergency Contact: (Name)________________________(Relationship)_______________
(Phone)____________________

Availabilty & Assignment Request

Which Library would you like to volunteer at? ☐ Main  ☐ Freedom  ☐ Either
Please mark the days and times that you are available to volunteer:
Monday  ☐ Tuesday  ☐ Wednesday  ☐ Thursday  ☐ Friday  ☐ Saturday
☐ I am an Adult Volunteer  ☐ I am a Student Volunteer (9th – 12th Grade)

Adult Volunteers, please read and mark if you are interested in any of these current volunteer opportunities:
☐ Library Link
This program brings library materials to homebound community members. LibraryLink program requires at least a 6 month commitment of 2-4 hours a month.
☐ Literacy Tutor
Volunteers are trained to work one-on-one with a person who wants to learn to read or write.
☐ Friends of the Library Volunteer
The Friends of the Library are seeking volunteers to help with book sales, fundraisers, and other activities in support of the library. These opportunities are for adult volunteers only.

Teen Volunteer Positions
Possible assignments may include:
• Library housekeeping (dusting, straightening and cleaning books, etc.)
• Clerical support and database searching
• Teen Advisory Board
• Assisting with crafts and library programs

Related Experience

Education:
Name of School  Major Course of Study  Degree/Diploma?  Date Received
____________________________________________________________________________
____________________________________________________________________________

Work/Volunteer Experience:
Employer/Agency Name  Position  Contact Name/Phone  Dates:  Voluntary or Paid?
____________________________________________________________________________
____________________________________________________________________________

Do you currently hold any special certificates, licenses, or registrations (First Aid, CPR, etc.)?
____________________________________________________________________________

Please complete both sides of this form.
I hereby certify that all statements made in this application are true and correct to the best of my knowledge and I authorize investigation of all matters contained in this application or data pertinent to my volunteering. I acknowledge that any false statements or misrepresentation on this application will be cause for refusal of placement or immediate dismissal. I understand and agree that in the performance of voluntary services I am not a City of Watsonville employee and shall have no rights to wages or benefits and no promise, expressed or implied, of consideration for future employment agree to indemnify and hold the City of Watsonville, its employees and contractors, harmless from any and all liability for any injury that may be suffered arising out of or in any way connected with my participation in this program. I also agree to grant full permission to the City of Watsonville to use my name and any photographs, videography, motion pictures, or recordings for any purpose whatsoever without any obligation, liability, or compensation to me.

The undersigned, in consideration of serving as a volunteer for the City of Watsonville, agrees to indemnify and hold the City, its employees and its agents harmless from any and all liability for any injury, death, loss or harm that occurs by the above named volunteer, arising out of, or in any way connected with, participation in this program. I hereby authorize and give consent to the City of Watsonville, its successors and assigns, to copyright, broadcast, publish and display all photographs and videos taken by them in which I and/or my children appear.

Signature of Applicant: ___________________________ Date: __________

Signature of Parent/Legal Guardian (if under 18): ___________________________ Date: __________
Print Name of Parent/Legal Guardian: __________________________________________

Have you ever been convicted of a felony or a misdemeanor (not including minor traffic violations)? □ Yes □ No
A “yes” answer is not an automatic bar from placement; however, a false statement will disqualify you. If yes, please explain fully. Attach other sheets if necessary. ____________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

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Signature of Applicant: ___________________________ Date: __________

Signature of Parent/Legal Guardian (if under 18): ___________________________ Date: __________
Print Name of Parent/Legal Guardian: __________________________________________

For Office Use Only
Application Received By: ___________________________ Date Received: __________

Name of Supervisor: ___________________________ Program: ___________________________

Live Scan Appt.: ___________________________ Date Cleared: __________

Start Date: ___________ End Date: ___________ Total Hours Completed: __________
Comments: ________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
Not approved □ Reason: __________________________________________________________

Please complete both sides of this form.