



The New York Public Library
<http://www.nypl.org>

VOLUNTEER APPLICATION

- **PERSONAL INFORMATION**

Name _____ E-Mail Address _____
Telephone (Day) _____ (Evening) _____ (Cell) _____
Address _____ Apt. # _____
City _____ State _____ Zip Code _____

In case of emergency, notify (Name): _____
Telephone: _____ Relationship: _____

You must be at least 14 to volunteer. Volunteers under 18 must have a parent/guardian complete the consent section on the reverse side of this application. Age if under 18 _____

- **VOLUNTEER INTERESTS**

Why do you want to volunteer?

For each day, indicate times you might be available to complete a **two or three hour shift**:

Mon: ___ to ___ Tue: ___ to ___ Wed: ___ to ___ Thu: ___ to ___ Fri: ___ to ___ Sat: ___ to ___ Sun: ___ to ___

I would be interested in assisting with (check volunteer assignments listed below):

- Adult Programming
- Advocacy for libraries at public hearings and meetings
- Beautification of library yards/gardens
- Book discussion *
- Book sale *
- Children's Room activities * (applicants subject to background check)
- English conversation groups *
- Exhibitions
- Letter writing to elected officials
- Literacy tutoring in a Center for Reading and Writing *
- Shelving and maintenance of library materials *
- Teen activities * (applicants subject to background check)
- Welcoming library visitors *
- Other _____

* Training provided.

- **LOCATION PREFERENCE**

Branch of your choice _____ (Branch Name).
Please find branch name, address, and telephone number by clicking one of the links below.

[Central](#)

[Manhattan](#)

[Bronx](#)

[Staten Island](#)

• **OCCUPATION AND/OR EDUCATION**

Circle highest grade completed 9 10 11 12 College/Graduate School (degrees completed) _____

Current and /or former Occupation _____

Employer _____

Are you a student? Yes No

Which school do you attend? _____

• **SKILLS**

Do you know how to use a computer? Yes No

Are you familiar with: Internet Word Microsoft Excel

What language(s) other than English do you speak and/or write with fluency _____

What special interests and/or skills do you have that may help us to match you with the best volunteer assignment?

• **REFERENCE INFORMATION:**

Please provide a reference. Personal Professional

Name (first and last) _____ Phone _____

Applicant Signature _____ Date _____

PARENT/GUARDIAN CONSENT (for volunteers under age 18)

I give permission for the above applicant to volunteer at The New York Public Library for a maximum of _____ hours per week (three hours minimum). If you need to reach me, my phone number is Day _____ Evening _____ Cell _____

Parent/Guardian Signature _____ Date _____

Please mail completed form to the Volunteer Office, New York Public Library, Stephen A. Schwarzman Building, 476 Fifth Avenue, Room 67, New York, N.Y. 10018

FOR NYPL VOLUNTEER SITE SUPERVISOR ONLY

Interview Date _____ Interviewed by _____ Accepted Yes No

Start Date _____ Assignment _____

Comments: _____
