

373 Spruce Street Morgantown, WV 26505

P: (304) 291-7425 F: (304) 291-7427

VOLUNTEER APPLICATION FORM

First Name:	Last Name: _	
Address:		
City:	State:	Zip Code:
Home Phone:	or Mobile P	Phone:
Email:	@	
Emergency Contact (Name)):	
Phone:	Relationship	
Is this court ordered comm	nrt of a service project for school on the service? Yes Note: Note	0
Volunteer Areas of	Interest:	
Office/Clerical Seasonal Decorating Programs	Bulletin Boards/ Displays Cleaning/Maintenance Other:	Event Preparation Friends of MPL/Book Sale
Availability: Monday: Thursday:	Tuesday: Friday:	Wednesday: Saturday:
Location Preferenc Arnettsville	e: Cheat Area	Clinton District
Aull Center	Clay-Battelle	Morgantown



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Skills:	
Volunteer Experience:	
By completing and submitting this application, I hereby a position as a volunteer, as that term is defined by the may provide to the Morgantown Public Library System volunteer, and free from coercion or duress. I further of for my services as a volunteer, I will receive no comper	e Fair Labor Standards Act, and that any services that I n (MPLS) will be rendered solely in my capacity as a certify, understand, and agree that, in consideration
Signature:	Date:
Parent/Guardian Consent (Under 18) I give permission for the above applicant to volunteer a	
Parent/Guardian Signature:	Date:
Phone:	
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Interview Date: Interviewer:	Start Date:
Placement: Commer	nts:
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