

Community Library Network[®]

KOOTENAI & SHOSHONE COUNTIES

Volunteer Application

Thank you for your interest in volunteering. You can find out what tasks are available by reading our [Volunteer Opportunities section](#). We follow federal and state labor laws governing children under the age of 16. Check [YouthRules](#), published by the US Department of Labor, to learn more. After completing this form, please deliver or send it to your library or email it to Volunteer@CommunityLibrary.Net.

Name: _____ I am over the age of 18
Address: _____ City: _____ Zip: _____
Phone: _____ Email: _____

At which library or department do you want to volunteer (check all that apply)?

<input type="checkbox"/> Athol	<input type="checkbox"/> Post Falls	<input type="checkbox"/> Outreach Department
<input type="checkbox"/> Bookmobile	<input type="checkbox"/> Rathdrum	<input type="checkbox"/> Summer Events
<input type="checkbox"/> Harrison	<input type="checkbox"/> Spirit Lake	<input type="checkbox"/> Technical Services Department
<input type="checkbox"/> Hayden	<input type="checkbox"/> Adult Programs	<input type="checkbox"/> Youth Services Department
<input type="checkbox"/> Pinehurst		

Our programs are supported by two Friends of the Library Groups through book sales. Both groups meet monthly and welcome new members. Please have someone contact me about:

[The Friends of the Community Library Network](#)

[The Friends of the Post Falls Library](#)

Describe your skills, abilities, and interests.

What is your preferred volunteer schedule?

Emergency Contact

Name _____ Phone _____ Relationship _____

Have you ever been convicted of a felony? No Yes

If yes, please explain:

Liability Release

I will follow procedures regarding safety, accidents, and injuries.

I understand that in my capacity as a Library volunteer I may come into contact with confidential information. I agree to protect this information to the best of my abilities as a volunteer and not divulge it during or after my service as a volunteer has ended.

I understand that submission on this application online constitutes my signature.

Signature: _____

Date: _____