



MASSILLON PUBLIC LIBRARY

VOLUNTEER SERVICE APPLICATION AND AGREEMENT

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____

BEST PHONE NUMBER: _____ HOME CELL/MAY WE TEXT YOU? _____

EMAIL: _____

PLEASE CHECK YOUR AGE CATEGORY: YOUTH/TEEN (12-18) ADULT (18+)

PRESENTLY EMPLOYED? NO YES - EMPLOYER NAME: _____

VOLUNTEERED BEFORE? NO YES - WHERE: _____

DATES: FROM _____ TO _____

DUTIES? _____

CHECK ALL THE LIBRARY SERVICE AREAS THAT ARE MOST INTERESTING TO YOU:

- Building and Grounds - gardening, dusting, picking up litter, etc.
- Children's Department (children ages birth to Grade 6) - craft preparation, cleaning books, program aides, etc.
- Young Adult Department (Grades 7 through 12) - craft preparation, program aides, etc.
- Adult Programming - program aides, etc.
- Circulation Department - pulling holds, cleaning CDs/DVDs, etc.
- Outreach Services Department - special events aides
- Local History Department - index local newspapers, clip newspaper articles about MPL, online document transcription, etc.
- Miscellaneous - shredding documents, straightening shelves, maintaining the Daily Book Sale rack, etc.
- Fundraising - Friends of the Library Book Sale, etc. (We will share this information with the Friends of the Library.)

WHICH MPL LOCATION(S) WOULD YOU LIKE TO VOLUNTEER AT: MAIN ASKREN BELLONI

WHAT HOURS WOULD YOU BE AVAILABLE TO VOLUNTEER (Example: 11am-2pm, Not Available, etc.):

MONDAY _____ TUESDAY _____ WEDNESDAY _____

THURSDAY _____ FRIDAY _____ SATURDAY _____

WOULD YOU BE AVAILABLE FOR: LONG-TERM/WEEKLY PROJECTS
 SHORT-TERM PROJECTS
 ON-CALL AS NEEDED

DATE WHEN YOU COULD BEGIN VOLUNTEERING: _____

LAST NAME: _____ FIRST NAME: _____

EMERGENCY CONTACT INFORMATION:

NAME PHONE RELATIONSHIP

NAME PHONE RELATIONSHIP

ARE YOU ABLE TO LIFT AND/OR BEND? YES NO

DO YOU HAVE A MEDICAL CONDITION THAT MPL STAFF SHOULD BE AWARE OF?

NO YES: _____

AS AN MPL VOLUNTEER, I AGREE TO:

- ABIDE BY THE MASSILLON PUBLIC LIBRARY BEHAVIOR POLICY, DRESS CODE, VOLUNTEER HANDBOOK, AND ANY APPLICABLE HEALTH AND SAFETY POLICIES.
- ACCEPT GUIDANCE FROM AND RESPECT THE DECISIONS OF PAID MPL STAFF.
- MAINTAIN CONFIDENTIALITY OF ALL PROPRIETARY OR PRIVILEGED INFORMATION REGARDING STAFF MEMBERS, PATRONS, VOLUNTEERS, AND LIBRARY BUSINESS.
- STAY WITHIN THE BOUNDARIES OF VOLUNTEER RESPONSIBILITIES.

I UNDERSTAND THAT AN INTERVIEW MAY BE REQUIRED AND A BACKGROUND CHECK WILL BE REQUIRED BEFORE PLACEMENT IN ANY VOLUNTEER POSITION.

I CONFIRM THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND ABILITY, AND I AGREE AND UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN MY DISMISSAL FROM THE PROGRAM.

I HEREBY AGREE TO RELEASE FROM LIABILITY AND HOLD HARMLESS THE MASSILLON PUBLIC LIBRARY AND/OR ANY OF ITS REPRESENTATIVES, AGENTS, OR EMPLOYEES FOR ANY INJURY, ILLNESS, LOSS, OR DAMAGE SUSTAINED BY ME DURING THE PERFORMANCE OF MY DUTIES AS A VOLUNTEER FOR THE MASSILLON PUBLIC LIBRARY. I AGREE THAT I SIGN THIS WAIVER OF LIABILITY FREELY AND VOLUNTARILY.

I UNDERSTAND THAT THE MASSILLON PUBLIC LIBRARY IS REQUIRED TO VERIFY ELIGIBILITY FOR A VOLUNTEER POSITION WITH RESPECT TO THE OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM (OPERS). I FURTHER UNDERSTAND THAT I AM REQUIRED TO PROVIDE MY SOCIAL SECURITY NUMBER TO BE USED IN THIS VERIFICATION PROCESS VIA THE OPERS SECURE WEBSITE. THIS VERIFICATION WILL CONFIRM WHETHER I HAVE PRIOR PUBLIC SERVICE EMPLOYMENT OR AGE AND SERVICE, OR DISABILITY BENEFITS WHICH MAY PRECLUDE MY ELIGIBILITY TO VOLUNTEER.

I ATTEST THAT I UNDERSTAND THAT VOLUNTEERING FOR THE MASSILLON PUBLIC LIBRARY SHOULD IN NO WAY BE CONSTRUED AS PAID EMPLOYMENT.

I UNDERSTAND THAT I WILL BE NOTIFIED OF MY ELIGIBILITY BY THE MASSILLON PUBLIC LIBRARY VOLUNTEER COORDINATOR.

SOCIAL SECURITY NUMBER SIGNATURE DATE
(REQUIRED)

REQUIRED IF VOLUNTEER IS UNDER 18 YEARS OF AGE:

I GRANT MY PERMISSION FOR THE ABOVE MINOR TO PARTICIPATE IN THE MASSILLON PUBLIC LIBRARY VOLUNTEER PROGRAM.

PARENT/GUARDIAN SIGNATURE (REQUIRED FOR MINOR VOLUNTEER) DATE

PLEASE RETURN THIS COMPLETED APPLICATION TO:
MASSILLON PUBLIC LIBRARY
ATTN: LAURA KLEIN
208 LINCOLN WAY EAST
MASSILLON, OH 44646

OPERS Status Verification	
COMPLETED BY: _____	DATE: _____
RESULT: _____	