SCHERTZ PUBLIC LIBRARY

VOLUNTEER APPLICATION

798 Schertz Parkway Schertz, Texas 78154 (210) 619-1700

Name_____ Date_____

Address_____

City _____ State _____ Zip _____

Telephone Number (Best number to reach you) _____

Email _____

We do not accept court-ordered community service at this time.

In case of emergency contact:

Name_____ Telephone_____

(Relationship)

Employment/Volunteer Experience:

Special skills/Interests_____

Job Experience_____

Volunteer Experience_____

Reference (Not a Relative)

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

I can make a commitment of: 3 months ____ 6 months ____ 1 year ____ other _____

When can you work?

	Mon	**Tue**	**Wed**	**Thu**	**Fri**	**Sat**	**Sun**
A.M.	____ to ____	____ to ____	____ to ____	____ to ____	____ to ____	____ to ____	____ to ____
P.M.	____ to ____	____ to ____	____to ____	____ to ____	____ to ____	____ to ____	____ to ____

Check the types of work situations you would be interested in:

Working with the public _____ Working with a group of volunteers _____

Working individually _____ Assisting with computers _____

I certify that all statements on this application are true to the best of my knowledge. I give permission for the reference to be contacted.

Signed _____ **Date**_____

Schertz Public Library

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LIABILITY WAIVER

I, _____ do hereby agree to indemnify and hold harmless the Schertz Public Library and the City of Schertz from any and all claims or causes of action that may arise out of performance of my assigned duties. I waive any right of action I have against the Schertz Public Library and the City of Schertz in consideration of my participation as a volunteer for the Library.

Signed_____ Date_____

CONFIDENTIALITY STATEMENT

I realize that in my capacity as a Schertz Public Library volunteer I may come in contact with confidential information. I do hereby agree to protect this information to the best of my abilities as a volunteer and not to divulge it during or after my services as a volunteer has ended.

Signed_____ Date_____

VOLUNTEER STATEMENT

I sought out and independently volunteered my services to the Schertz Public Library. I understand that volunteer work is unpaid and I will not be entitled to wages for the duration of the time I work at the Library. In addition, I acknowledge that my volunteer services can be terminated at any time for any reason. Finally, I acknowledge that I am not entitled to any position with the Library or the City of Schertz at the completion of my volunteer services.

Signed _____ Date_____