

# Library Link Volunteer Application

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I. : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ (Other): \_\_\_\_\_

e-mail: \_\_\_\_\_ Library Card Number \_\_\_\_\_

Number of Library Link Patrons you would like to serve: \_\_\_\_\_ 1 \_\_\_\_\_ 2

Distance willing to travel to make deliveries: \_\_\_\_\_ <15mi. \_\_\_\_\_ <30mi. \_\_\_\_\_ any

## Matching Preferences

*Please match me with a patron who is . . .*

\_\_\_\_ male    \_\_\_\_ female    \_\_\_\_ deaf    \_\_\_\_ visually impaired

\_\_\_\_ Spanish-speaking    \_\_\_\_ an acquaintance    \_\_\_\_ no preference

\_\_\_\_ pet-free home    \_\_\_\_ non-smoking home

## Statistical Information

*This information is optional. It helps us with our program statistics.*

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_

Occupation: \_\_\_\_\_

**\*\*\* All Library Link Volunteers will have a Police Background check and will attend a brief Volunteer Training Session.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

