



omahapubliclibrary.org

Quality of community matters

ALL CLEAR! VOLUNTEER APPLICATION

Name Last First MI

Address Street City Zip code

Phone: Day Evening

Age

At which branch do you prefer to work?

When are you available? Day-time evenings weekends

AS AN OMAHA PUBLIC LIBRARY ALL CLEAR VOLUNTEER

- I understand that I am volunteering to clear my library record of fines.
I will take the required training for the job for which I am assigned.
I will make every effort to honor my commitment and will call prior to my scheduled volunteer time if I must reschedule for any reason.
I have received a copy of the library's policy for ALL CLEAR service and agree to abide by this policy.

Signature Date

Parent or Guardian Signature

Address Phone Number

For Office Use Only: Amount of Fines, Completion date, Assigned Branch, Hours required, Supervisor