



*Quality of community matters*

## ADULT VOLUNTEER APPLICATION

Return to: Volunteer Services  
W. Dale Clark Library  
215 S 15 ST, Omaha NE 68102

### Personal Information

Name:		
<hr/>		
Address:		
<hr/>		
City:	State:	Zip:
<hr/>		
Home Phone:	Cell Phone:	E-mail address:

### Employment Information

Current Employer:
<hr/>
Position/Title:
<hr/>
Duties include:

### Emergency Contact

Name:	Relationship:	
<hr/>		
Address:		
<hr/>		
City:	State:	Zip:
<hr/>		
Day Phone:	Evening Phone:	Cell Phone:

## Education Information

High School:	Diploma	GED	
Circle highest level of education completed:	1 2 3 4 Undergraduate	5 6 7 8 Post-Grad	10 11 12 Doctorate
Please list all degrees _____			

## Volunteer Information

I am available:	Mornings	Afternoons	Evenings				
Circle which days you are available:	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
At which location would you like to volunteer? You may check as many as you like, but please number in priority order if choosing more than one.							
___ W. Dale Clark Library	___ Milton R. Abrahams Branch	___ Benson Branch					
___ Bess Johnson Elkhorn Branch	___ Florence Branch	___ Millard Branch					
___ A.V. Sorensen Branch	___ South Branch	___ W. Clarke Swanson Branch					
___ Charles B. Washington Branch	___ Willa Cather Branch						
Have you ever volunteered before? _____ If so, where? _____							
Brief description of duties _____							
Please list skills, abilities, or hobbies _____							
How did you learn about the Library's volunteer program? _____							

## Background Information

**References:** As part of the screening and placement process, all volunteers are required to submit two personal references. References must be over 18 years old and should not be members of your immediate family.

1.	_____	_____	_____	_____
	Name	Address	(Phone Number)	Relationship
2.	_____	_____	_____	_____
	Name	Address	(Phone Number)	Relationship
Have you ever been convicted of a felony or misdemeanor other than minor traffic violations?				
Yes	No	If so, please list _____		

I, \_\_\_\_\_, do hereby agree to indemnify and hold harmless the City of Omaha for any 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 City of Omaha in consideration of my participation as a volunteer for the Omaha Public Library.

I acknowledge that there is no salary or other compensation for my services as a volunteer, and, as a volunteer, I will not be covered by Workers' Compensation.

I also understand that in my capacity as a Omaha Public 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 to divulge it during or after my service has ended.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_