



Richardson Public Library Volunteer Application

Contact Information

Date Application Completed	
Last Name	
First Name	
Nick Name	
Street Address	
City / ZIP Code	
Home Phone/Cell Phone	
E-Mail Address	
Date of Birth (Optional)	

Education (check highest earned)

High School /GED Undergraduate Degree Graduate/Professional Degree

College or University you attended:

Degree/Major:

Special Training:

If you are under 18 please provide your:

School name:

Grade level:

I am seeking this volunteer position to:

Satisfy school/class/scholarship Community Service requirements

Number of hours needed:

Date by which hours must be completed:

Become a regular volunteer

Have you ever been convicted of a felony or misdemeanor?

Yes

No

If yes, please list the charge:

Previous Volunteer Experience

Please list any previous volunteer experience

Person to Notify in Case of Emergency

Full Name	
Relationship	
Street Address	
City ST ZIP Code	
Home Phone, Work Phone	
Cell Phone	

I will be available to volunteer starting Month: Day:

I understand that I will not be paid for my services as a volunteer, and I am giving my time freely to the library. If I am unable to fulfill a scheduled time for any reason, I am to notify my library supervisor as soon as possible. I also agree photograph(s), audio, or video(s) of me may be used by the Richardson Public Library for publicity purposes in newspaper/TV/radio and on the RPL website.

Applicant's Signature: Date:

For Library Use Only – Placement

Teen Volunteer

Department:
Position Title:

Liane Martins Volunteer Coordinator
972-744-4350 liane.martins@cor.gov

Richardson Public Library hours:
Monday – Thursday 10:00 a.m. – 9:00 p.m.
Friday & Saturday 10:00 a.m. – 6:00 p.m.
Sunday 2:00 p.m. – 6:00 p.m.