



# VOLUNTEER APPLICATION

**NAME** \_\_\_\_\_  
Last First Middle Phone number

**ADDRESS** \_\_\_\_\_  
Number Street City, State Zip Code

Are you volunteering to complete a program/project/court-ordered\* community service? \_\_\_\_ Yes \_\_\_\_ No  
**\*Notice:** For court-ordered community service, only Twin Falls County applications will be considered.

If yes, please explain. \_\_\_\_\_

In which department(s) are you interested?  Technical Services  Youth Services  Reference Department

**EDUCATION AND EMPLOYMENT HISTORY:** List High School or Colleges attended/attending, grade completed or type of degree received, and/or past work experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMENTS/SKILLS:** List any comments or skills that are applicable.

\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES:** List persons known, but not related, to you for at least one year.

NAME	RELATIONSHIP	PHONE NUMBER
1. _____		
2. _____		
3. _____		

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

\*\*\*\*\*

**If under 18 years of age, please complete the following section:**

AGE \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

I am willing to have my son/daughter work as a volunteer at the Twin Falls Public Library.

PARENT'S SIGNATURE \_\_\_\_\_