



VOLUNTEER APPLICATION

Yakima Valley Libraries
102 N. 3rd Street
Yakima, WA 98901
(509) 452-8541
www.yvl.org

INSTRUCTIONS: *This is an application for volunteers and is not used to apply for paid positions within Yakima Valley Libraries. Please complete application and attach an extra sheet if more space is needed. Applicant may print out application and fill out by hand. To turn in application: 1) you may turn application in to any Yakima Valley Library, or 2) mail completed application to: Human Resources, Yakima Valley Libraries, 102 N. 3rd St, Yakima WA 98901-2759. Equal access to programs, services, and employment is available to all persons. Those applicants requiring accommodation to the application process should notify a representative of the Human Resources Department.*

INFORMATION:

Print Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alternate phone: _____

In case of emergency, notify: _____ Phone: _____

Are you at least 14 years of age (required for L & I purposes)? YES NO

Are you under 18 years of age? YES NO

If YES, a signed Minor Volunteer Parent/Guardian Permission Form must be attached.

Volunteers under age 18 without a signed parent permission form will not be considered.

INTERESTS, SKILLS, SPECIAL TALENTS:

What interests you about volunteering at the Library: _____

Volunteer work preferred: _____

Special skills, knowledge or training: _____

Do you have a valid driver's license? YES NO Do you have transportation? YES NO

Indicate any language, *other than English*, that you speak, write or read: _____

SPEAK	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
WRITE	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
READ	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair

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Library location preferred: _____

AVAILABILITY:

When are you available to volunteer? (i.e., weekdays, mornings, weekends, evenings):

Time availability: _____ Hours per week or _____ Hours per month

Number of months available: _____

EXPERIENCE:

Past Volunteer/Work Experience: (attach separate sheet if needed)

Dates	Organization	Duties

REFERENCES:

Please provide the names and telephone numbers of 3 work or volunteer-related references (may use personal references if work/volunteer references not available).

Name	Work, volunteer or personal?	How long known	Phone
1.			
2.			
3.			

In the last ten years, have you been convicted of, or pled “guilty” or “no contest” to any felony?

YES NO Yakima Valley Libraries obtains a WSP background check on all volunteers prior to acceptance.

The following information is required to run a WSP background check:

Date of birth: _____ / _____ / _____ Male Female

NOTE: A positive response will not necessarily disqualify an applicant from volunteering. If yes, please explain and provide date(s) and details. If you need additional space, please attach a separate sheet for your explanation.

I certify that the information contained on this form is true and complete to the best of my knowledge. Discovery of false information may terminate all and any future volunteer opportunities.

Signature _____

Date _____

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