



VOLUNTEER APPLICATION

Walk into the Cedar Rapids Public Library and you'll discover a diverse community. Designed for readers and learners of all ages and from all backgrounds, we are the community's living room – a place to connect, unwind, share ideas, and explore new possibilities.

Working alongside our staff, volunteers transform a building of “stuff” into a dynamic place to dream, do, and discover. Whether you are caring for materials, guiding tours, or reading with children, you are constantly renovating our living room to make it a little bit bigger and better than it was yesterday. You give us space to grow and welcome in new ideas, people, and opportunities. So, open the door to your next great opportunity! We've saved a seat on the couch for you.

Personal Information

Name _____ Preferred Name _____

Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____ Birthdate ____/____/____

Email _____ Pronouns: he/him she/her they/them other

Emergency Contact

Name _____ Phone _____ Relationship _____

Interests, Skills, and Availability

The Library has a variety of volunteer opportunities. Our Volunteer Coordinator will meet with you to determine which opportunity will be the right fit for your interests, skills, and availability in consideration of the Library's current needs.

I am interested in volunteering in the following areas: *(check all that apply)*

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> With the public | <input type="checkbox"/> Behind the scenes | <input type="checkbox"/> Adopt-a-shelf | <input type="checkbox"/> Clerical/administrative |
| <input type="checkbox"/> Public advocacy | <input type="checkbox"/> Computers | <input type="checkbox"/> Arts/crafts | <input type="checkbox"/> Library outreach programs |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Tour guide | <input type="checkbox"/> Volunteer Corps | <input type="checkbox"/> Information desk |
| <input type="checkbox"/> Children | <input type="checkbox"/> Senior adults | <input type="checkbox"/> Small groups | <input type="checkbox"/> One-on-one with learners |

Please summarize any special skills, talents, or hobbies you might have, including language skills:

Please indicate what hours you are available:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

I am looking for volunteer opportunities that are: *(check all that apply)*

- Weekly Monthly Event based Project based Summer only School year only

I would be interested in volunteering at the following location(s):

- Downtown Library (450 5th Avenue SE) Ladd Library (3750 Williams Blvd SW)

Volunteer/Work Experience

Please summarize your previous volunteer/work experience (where, when, what you did).

Describe your favorite volunteer/work experience. Why was it your favorite?

If you are currently employed, the name of your employer: _____

Volunteer Goals

How did you learn about our volunteer program? _____

Why do you want to volunteer at the Cedar Rapids Public Library? _____

Are you volunteering to fulfill a requirement for a class or school program? Yes No

Are you volunteering to fulfill a legal community service requirement? Yes No

Background and Reference Check

It is the policy of the Cedar Rapids Public Library to provide a safe environment, both in our facilities and in our outreach programs. Therefore, we require background and reference checks on all volunteer applicants. A separate background check form will be provided. Please list two references (*co-workers, supervisors, teachers, neighbors, coaches – cannot be a relative*).

Name	Phone	Email	Relationship

Non-Discrimination Policy

It is the policy of the Cedar Rapids Public Library not to discriminate against any applicant or volunteer on the basis of race, gender, color, ancestry, national origin, religion, age, physical disability, sexual orientation, or gender identity.

Agreement and Signature

I certify that all information provided on this application and during the interview process is true and complete to the best of my knowledge. I authorize the Cedar Rapids Public Library to contact my references and authorize these references to provide the Library with information regarding my work/volunteer history, education, or character. I understand that appointment to a volunteer position is contingent upon the completion and review of background and reference checks. I understand, as a volunteer, that I must abide by the Library's rules and regulations.

Signature _____ Date _____

Completed forms can be sent to the Volunteer Coordinator at:

Cedar Rapids Public Library • 450 5th Avenue SE • Cedar Rapids, Iowa 52401
volunteer@crlibrary.org • Phone: 319.261.READ • Fax: 319.398.0476