



Franklin County Library System Volunteer Application Form

101 Ragged Edge Road South, Chambersburg, PA 17202

(717) 709-0282

Applicant Information (please print)

Application Date _____

Name _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip _____

Phone (cell) _____ Phone (home) _____

Email _____

In case of emergency, please contact

Name _____

Phone (cell) _____ Phone (home) _____

Availability (Check all that apply)

Regularly each week for _____ number of hours Summers only September-May only

Morning Afternoon Evening Weekdays Weekends

Volunteer Locations (Check all that apply)

Bookmobile and Outreach (Chambersburg) Coyle Free Library (Chambersburg)

Grove Family Library (Chambersburg) Ft. Loudon Library (Ft. Loudon)

Besore Memorial Library (Greencastle) St. Thomas Library (St. Thomas)

System

Interests (Check all that apply)

Adult Programs Annual Appeal Book Sale Bulk Mailings Committee Chair/Member

Community Outreach Events Landscaping Non-public work Youth Programs

Other: _____

Skills (Check all that apply)

Internet Explorer Microsoft Office Suite Online Catalog Other: _____

Restrictions/Limitations

Why do you want to volunteer at the library?

I understand that the Franklin County Library System reserves the right to screen volunteers, to accept or reject any applications, and to place applicants in specific locations and positions based on the needs of the Library. I understand that I will not be paid for my services as a volunteer and I am giving my time freely to the Library.

Applicant's Signature: _____ Date: _____

STUDENT VOLUNTEER PERMIT

(To be signed by parent/guardian if applicant is under 18 years of age)

_____ has my permission to work as a volunteer for the Franklin County Library System.

Signature of Parent/Guardian _____ Relation to applicant _____

Phone Number _____