Volution       Volution       Volution       Volution         Adult Volunteer Application       Volution       Volution         I am submitting this application for the following position:       I would like to work at the following location(s)			
L Archives L Central Services L Clarksburg L Davis L Esparto L Knights Landing			
🗌 West Sacramento 🗌 Winters 🗌 Town of Yolo 🗌 YoloReads Literacy Program			
Personal Information			
Address: City & ZIP:			
Phone: Email:			
Contact Preference: D phone D email			
Is volunteer service court mandated? 🛛 Yes 🗌 No Number of hours: Date Due:			
Have you worked or volunteered in a library before? 🛛 Yes 🗍 No			
If yes, what library?			
Supervisor's name & contact:			
Do you have any special skills you'd like to share as a volunteer?			

# Availability/Desired schedule:

The Library cannot guarantee that shifts will be available for your preferred times.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Do you know any languages besides English?

Language:	Speak Conversational	□ Speak Fluently	🗌 Read	□ Write
Language:	Speak Conversational	Speak Fluently	🗌 Read	U Write

# Experience

Please list any work or volunteer experience that is relevant to this volunteer position, including name and contact information for your supervisor or a coworker who can serve as a reference. If you do not have work-related references, please use the "other references" section to provide at least two references from people who are not your relatives.

### **Other References**

Organization:	paid work volunteer	Dates of Employment
Supervisor/Reference Name	Supervisor/Reference Phone or Email	
Duties		

Organization:	paid work	U volunteer	Dates of Employment
Supervisor/Reference Name	Supervisor/Refe	rence Phone or Email	
Duties			

Name	Contact Info	Relationship

#### Media Release

I hereby grant to Yolo County the right and license to use my name, image, likeness and comments in Yolo County materials for internal and external audiences. These materials include but are not limited to advertisements, brochures, viewbooks, news releases, magazines, newspapers, newsletters, videos, websites, Facebook, and Instagram. Initial:\_\_\_\_\_

# Fingerprinting

All volunteers 18 years of age or older are required to pass a "Live Scan Fingerprint" background check. Notifications of convictions are sent to the Yolo County Human Resources by the State of California, Department of Justice, Bureau of Criminal Investigations. Additionally, subsequent arrest notifications may be obtained.

• I have read and certify that I understand that if selected, my offer of volunteer placement is contingent upon the results of a criminal history/LiveScan process, and may be rescinded if I have any convictions that are found to be disqualifying for the position. Initial:

# Acknowledgement and Signature

l,uno	derstand and acknowledge:			
INSERT NAME 1. I am a volunteer, donating my time, services and energies to the County of Yolo as a Yolo County Library volunteer.				
2. I will receive no salary, renumeration or benefits extended to employees of the County of Yolo.				
<ol> <li>I will be covered by worker's compensation insurance. provide my exclusive remedy for recovery from the Cou participating as a volunteer.</li> </ol>				
Signature:	Date:			
Thank you for your interest in volunteering with Yolo County Yolo County Libra				
For Staff Use Only - Please Do N	lot Write Below This Line			
Interview Date & Time: Location:	Interviewer(s) Initials:			
References Contacted:				
Referred to HR for background check Date:				
Background check passed: 🗌 Yes 🗌 No Date:				
Position:				
On-call (as needed) Temporary (Less than 3 months)	Long-term (4 months or more)			
Branch or Location:	Start Date:			
Hours / Schedule:				
Supervisor / Team Leader:				
Orientation Date & Time:	Location:			
Volunteer no longer active as of date:				