Yolo County Library
Adult Volunteer Application

I am submitting this application for the following position: _____

I would like to work at the following location(s)

☐ Archives ☐ Central Services ☐ Clarksburg ☐ Davis ☐ Esparto ☐ Knights Landing

☐ West Sacramento ☐ Winters ☐ Town of Yolo ☐ YoloReads Literacy Program ☐ ESL

Personal Information

Name: _____

Address: _____ City & ZIP: _____

Phone: _____ Email: _____

Contact Preference: ☐ phone ☐ 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

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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.

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

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Other References

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

I, _____ understand 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.
3. I will be covered by worker's compensation insurance. Further, California Worker's Compensation laws provide my exclusive remedy for recovery from the County of Yolo for any injury sustained by me while participating as a volunteer.

Signature:_____ Date:_____

Thank you for your interest in volunteering with Yolo County Library. Please return your application to your local Yolo County Library Branch

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For Staff Use Only - Please Do Not 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:_____