

**ALGOMA PUBLIC LIBRARY
VOLUNTEER APPLICATION**

Name _____

Address _____

Telephone number _____

E-mail address _____

Social Security # _____

Driver's License # _____ **Date of Birth** _____

Volunteer Areas of Interest

Do you have a preferred area of interest?

List below any skills which may relate to your volunteer interest.

I have read, understand and agree to abide by the Algoma Public Library's Volunteer Policy.

I authorize the Algoma Public Library to obtain information and records pertaining to me from the following sources for the purpose of conducting a background check. *Municipal, State or Federal law enforcement agencies; any law enforcement officer.*

Signature _____ **Date** _____