



Volunteers

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West Slope Community Library Volunteer Application

We have a Volunteer Position for
YOU!

Name _____
Last First MI

Address _____
Street City Zip

Telephone _____

Volunteer work needed: Check-in and shelving

I am available:

AM Afternoon Evening

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Past volunteer experiences & skills:

Physical limitations, if any _____

Signature _____ Date _____