

PARRY SOUND PUBLIC LIBRARY

VOLUNTEER APPLICATION

www.parrysoundlibrary.ca

NAME (print) _____

ADDRESS _____
Number Street Apt City Postal Code

HOME PHONE _____ **WORK PHONE** _____

OTHER/CELL PHONE _____

E-MAIL ADDRESS _____

Are you currently attending school? Yes No School Name: _____ Grade/Year _____

Are you currently required to complete 40 hours of community service for secondary school? Yes No

Have you ever been convicted of a criminal offense for which a pardon has not been granted? Yes No

Do you have any medical conditions that we should be aware of? Yes No If yes, please specify _____

Languages spoken (other than English): _____

EMERGENCY CONTACT: _____ **Relationship:** _____

HOME PHONE _____ **WORK PHONE** _____

CELL PHONE _____

VOLUNTEER OPPORTUNITIES - Please mark those that are of interest to you.

- Shelf Reading & Shelving Library Materials
- Library Programs such as Travelogues
- Children's Programs (reading, crafts, stories)
- Library support at specially arranged times
- Special projects (such as fundraisers)

For Library Use Only:
Interview: _____
Placement: _____
Training: _____
Start: _____
Added: _____

Volunteer experience: _____

Work experience: _____

Why are you interested in volunteering at the Parry Sound Public Library?

As a Volunteer, I fully understand and agree to the following:

- I agree to hold harmless the Library from all claims, demands, causes of action, loss, costs or damages that the Library may suffer, incur or be liable for in relation to any injury or property damage I may suffer or cause in connection with my participation as a volunteer. I hereby release, waive, and discharge the Library from all liability to my heirs, executors, administrators, and assignees for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.
- I understand the Ontario Workplace Safety and Insurance Act *does not* apply to volunteers, and that as a result I am not entitled to make any claims for compensation pursuant to the Ontario Workplace Safety and Insurance Act.
- Pursuant to Section 39(1) of the *Municipal Freedom of Information & Protection of Privacy Act 1989*, I authorize the Library to verify all information and/or dates contained in my application including contacting the persons listed for the purpose of obtaining personal references and any data contained in my personnel file.
- That except as authorized, I will not disclose, release or make use of any confidential or personal information that has been shared with, or acquired by me as a volunteer.
- That I will not receive any remuneration, salary, wage, payment or any employee benefits whatsoever, and I understand that there is no employment relationship as a result of my volunteer activity. Further I understand that the Library may at its sole discretion reassign me or terminate my services as a volunteer, without notice or compensation.
- All volunteers are required to undergo a criminal reference check. Forms are available from the library.
- I give permission for my picture to be taken at Library events, and for those pictures and/or my verbal or written comments to be used by the Library for publicity and campaign purposes including both print and electronic media.

Signature of Volunteer

Date

Witness

Date

If under 18 years of age, a parent or legal guardian is also required to sign.

I hereby certify that I am the parent/legal guardian of _____
and that she/he has my permission to serve as a volunteer with the Library. As the parent/legal guardian I fully understand and have full knowledge of the nature and extent of the risks involved with his/her participation as a volunteer.

Signature of Parent/Legal Guardian

Date

Witness

Date

Personal information on this form is for internal purposes. Such information is collected under the authority of the Public Libraries Act 1984. Any questions about this collection should be directed to the Chief Librarian, Parry Sound Public Library, 29 Mary Street, Parry Sound, Ontario. P2A 1E3 Telephone number (705) 746-9601.