

# tacoma public library

Start here. Go anywhere.

Return this completed application & the attached Washington State Patrol form to the MANAGER or SUPERVISOR of the library or department where you would like to volunteer. (If you are less than 18 years of age, you will be given a copy of the Parent Authorization form. In order for your application to be processed you must return the Parent Authorization form completed by your parent or guardian, and the completed application form, and the completed Washington State Patrol form to the manager or supervisor at the library where you wish to volunteer.)

## VOLUNTEER APPLICATION

"An Equal Opportunity Employer"

**Thank you** for your interest in volunteering at the Tacoma Public Library! Please type or print the information requested below.

Name: \_\_\_\_\_  
*Last First Middle*

Phone: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Address: \_\_\_\_\_  
*City State Zip*

E-Mail Address: \_\_\_\_\_

Emergency contact persons:

Name	Address	Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____

If you are under 18 years of age, check here:

We will give you a copy of the Parent Authorization form for your parent to complete.

All volunteers (as defined in RCW 51.12.035) at the Tacoma Public Library are covered by workers compensation (medical aid). To volunteer under this definition, volunteering must be brought about by one's own free choice. The volunteer must not be an offender required to perform community services pursuant to a court order. Also, the volunteer must not be a student volunteer, an enrolled student (K—12) who is participating as a volunteer under a program authorized by the school. Exceptions to mandatory coverage are Emergency Service Workers and registered RSVP (Retired Seniors Volunteer Program), volunteers who are covered with separate policies.

If you should be injured while working as a Volunteer for the Tacoma Public Library, you are to complete the Library's OJI forms within twenty-four (24) hours of the injury. The forms may be secured from the supervisor/manager of your work site or from the Library Administration.

Tacoma Public Library volunteers are required to record their hours on timesheets.

**Confidentiality Statement:** I understand that in the course of my work as a volunteer I may have access to personal information about library users, including their requests for information and records of materials they may have borrowed. I hereby agree to hold such information in complete confidence and to access it only in the course of performing my volunteer assignment.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

## VOLUNTEER TASK DESCRIPTIONS

We appreciate your support. Please check the areas listed below that interest you and we will match them with our current needs. *Thank you again for your time and generosity.*

- Hospitality** — Serve as greeter, docent and/or monitor to ensure that patrons feel welcome at special events which may include author's lectures, children's programs, the StoryLab programs and activities, and movies.
- Children's/Teen Events** — Assist staff with Children's Programming and/or Summer Reading Club activities, and with programming and special activities, which may include set-up, logistics, and other tasks for the annual celebration in late August, and/or assist with Teen Programming and/or special activities with the StoryLab.
- Local History Projects** — Assist library professionals and para-professionals with various projects such as genealogy, neighborhood histories, securing photographs and other material as assigned.
- Cleaning of Children's Books** — Wipe down and clean covers of books to preserve them for continued use.
- Community Outreach** — Staff booths and/or display tables at events such as Ethnic Fest, Taste of Tacoma, the Puyallup Fair and Tacoma Rainier's baseball games. Distribute posters and flyers (at churches, schools, community centers) to promote upcoming library events. Design and decorate bulletin boards at branches to promote programs and events; and/or assist Teen Librarians with offsite outreach to various teen related organizations including middle and high schools to discuss the StoryLab with teachers and students.
- Book Discussion Leaders** — Organize and lead teen and adult reading groups at branches including selection of books and arranging meetings.
- StoryLab Mentoring**— Skill or expert knowledge in the use of digital audio/visual equipment and/or audio/visual production to provide technical support and guidance for teens in the use of various software applications and external hardware, such as video cameras and microphones.

**Availability:**

- [ ] Daytime \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m. M/T/W/Th/F/Sat (circle one or more)
- [ ] Evenings \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m. M/T/W/Th/F/Sat (circle one or more)
- [ ] Weekends \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m. M/T/W/Th/F/Sat (circle one or more)
- [ ] Special Events \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m. M/T/W/Th/F/Sat (circle one or more)

**Where would you like to volunteer?**

- [ ] Any Library
- [ ] Any event (whether at the library or at another location)
- [ ] Fern Hill
- [ ] Kobetich
- [ ] Main Library - downtown
- [ ] Mottet
- [ ] Moore
- [ ] Swasey
- [ ] South Tacoma
- [ ] Wheelock
- [ ] StoryLab
- [ ] Summer Reading Club

\*\*\*\*\*FOR LIBRARY USE ONLY BELOW THIS LINE\*\*\*\*\*

Manager/Supervisor (print name): \_\_\_\_\_

Identify the tasks from the list above that you plan to assign to this volunteer:

**WASHINGTON STATE PATROL  
FORM**

Identification and Criminal History Section

**REQUEST FOR CRIMINAL HISTORY INFORMATION  
CHILD/ADULT ABUSE INFORMATION ACT  
RCW 43.43.830 through 43.43.840**

**Child/Adult Abuse Information: Response limited to convictions of crimes against children or other persons, dependency proceedings, abuse of vulnerable adults, and DOL disciplinary board final decisions and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary board final decision. The business or organization shall use this record only in making the initial employment or engagement decision. Further dissemination or use of the record is prohibited.**

**Requesting Agency/Address:**

Tacoma Public Library  
1102 Tacoma Ave. S.  
Tacoma, WA 98402

**APPLICANT OF INQUIRY  
(Name and date of birth are mandatory)**

Applicant's Name:

First

Middle

Last

Alias/Maiden Name:

First

Middle

Last

Date of Birth:

Month / Day / Year

Sex:

Race:

Driver's License No.

State:

*Secondary dissemination of this criminal history record information response is prohibited unless in compliance with RCW 10.97.050.*

**This identification certificate is the result of a request for criminal conviction record information from the Washington State Patrol Identification and Criminal History Section on a prospective applicant by a business or organization. Pursuant to the Child/Adult Abuse Information Act, RCW 43.43.830 through 43.43.840, if the conviction record, disciplinary board final decision, or civil adjudication record shows no evidence of a crime against children or other persons, an identification declaring the showing of no evidence shall be issued to the applicant.**