



# Niles Public Library District

6960 Oakton Street • Niles, Illinois 60714  
847-663-1234 • www.nileslibrary.org

**Monday-Thursday, 9am-9pm Friday-Saturday, 9am-5pm  
Sunday, 1pm-5pm (Closed Sunday Memorial Day-Labor Day)**

## Volunteer Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Time commitment (circle all that apply):

Short term (2months) / Long term (6 months) / Regular weekly schedule / Special projects

### Hours available (for regular weekly commitment, we request at least 2 hours per week):

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							

### Volunteer opportunities (circle your interests):

Shelving; Inventory; Greeter's Desk; Special Projects; Retrieving Items From Shelves;  
Shelf-reading; Translation; Other: \_\_\_\_\_

Volunteer experience: \_\_\_\_\_

### Education (circle highest completed):

High school - Technical school - Some college - College (field): \_\_\_\_\_

Are you fluent in another language: \_\_\_\_\_

Reference (Not a relative) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*This form should be returned to Sue Brice or left at the Circulation Desk.*