	Volunteer Application						
Carnegie Library of Pittsburgh				volu	Volunteer Services 4400 Forbes Avenue Pittsburgh, PA 15213 inteers@carnegielibrary.org Phone: 412.622.1015 Fax: 412.622.6278		
				Date:			
Name:							
Address:			7				
City: Telephone:		Email:					
Age: Unde	r 13 🗌 13-17 🗌 18-25	26-36	37-54	55-64	65+		
Are you a member of Which location? The Friends of Carnegie Library of Pittsburgh?							
Have you volu	nteered at a library before? 🗌 Y	es 🗌 No	^D Whic	h library?			
Are you volunt	eering as a community service red	quirement					
Number of C. S. hours to fulfill: To be completed by: School/Organization/Institution: Court:Organization/Institution: Reason for community service:							
Are you interning? Yes No School:							
Will this be a o	ne time or short-term volunteer e	experience	? [Yes []No If yes	s please		
specify:							
At which librar to volunteer?	y location(s) would you prefer						
What days and available to vol	hours of the day are you unteer?						
Do you have co	omputer skills? Please specify.						
Do you have an might restrict y	ny physical limitations that our activity?						
Do you have as	ny special skills or interests?						
Education:							

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Check at	ny of the bi	road categories of volunteer oppo	ortunities that m	ight interest you:				
Special Projects Bulk Mailin			vith seniors /Shelf Reading	 Teach Foreign Language Other 				
Emerger	ncy Contact	t:						
Name:								
Telepho	ne:							
Relation	ship:							
Reference	ces: Please l	list two professional, educational of	or character refe	erences we may contact:				
Name:			Telephone:					
Relation	ship:							
Name:			Telephone:					
Relation	ship:							
VOLUNTEER AGREEMENT								
and to s monetar benefits PROGR	ecure infor y compens in the e AM reserv	rmation from personal reference sation for the work that I perfo vent of injury. THE CARNE	s. I understand orm or be entit CGIE LIBRAR	ny of the information on this application that as a volunteer I am not entitled to eled to worker's compensation or group Y OF PITTSBURGH VOLUNTEER tement and the right to terminate services				

Volunteer:				
Signature of Parent (if under 18 years of				
Interviewer:			Date:	
Return application	to: Volunteer Services Carnegie Library of Pi 4400 Forbes Ave. Pittsburgh, PA 15213	ttsburgh		
For Office Use: Start Date:				
Department:				
Supervisor:				
Rev 12.15.08				