



## Volunteer Application

Applicant Information					
Last Name		First		M.I.	
Phone		Are you employed by the City of Bozeman? * <input type="checkbox"/> Yes <input type="checkbox"/> No *City employees are not allowed to volunteer at the Bozeman Public Library.			
Email Address			DOB:		
Street Address			Apartment/Unit #		
City			State	Zip	
Emergency Contact					
Name		Relationship	Address		Phone
Disclaimer And Signature					
I hereby acknowledge that I have completed the above application completely and accurately to the best of my knowledge. I also acknowledge that the City of Bozeman will conduct a background investigation on me to determine my suitability for admission to the program. Permission is hereby granted to conduct a background investigation based on the information given in this application.					
Signature				Date	

The Bozeman Public Library makes reasonable accommodations for any known disability that may interfere with a volunteer's ability to apply or in a volunteer's ability to perform the essential functions of the volunteer program. If you are in need of accommodation, please contact the Library Director. The Bozeman Public Library does not discriminate against its employees, volunteers, or applicants for employment on the basis of race, color, religion, creed, sex, age, marital status, national origin, political ideas, or on the basis of perceived or actual disability, sexual orientation or gender identity, or Union affiliation. This relates to all aspects of employment, to the use of all facilities, and participation in all City-sponsored activities. This policy does not preclude discrimination based on bona fide occupational qualifications or other recognized exceptions under the law.

Please return the completed application to a public service desk at the Library or to:

Bozeman Public Library—Attention: Miranda Hoffman

626 East Main

Bozeman, MT 59715

Questions? Contact Miranda at [mhoffman@bozeman.net](mailto:mhoffman@bozeman.net) or (406) 582-2435.

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<b>Present/Previous Work Experience (Optional—attach resume)</b>							
<b>Present/Previous Volunteer Experience</b>							
<b>What volunteer experiences have you: Enjoyed the most?</b>	<b>Enjoyed the least?</b>						
<b>What is your availability?</b>							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Time commitment:	<input type="checkbox"/> 6 months		<input type="checkbox"/> 1 year		<input type="checkbox"/> 1+ years		
<b>Skills and Interests</b>							
<b>Computer/Technology Skills (please include software)</b>							