



# Northwest Regional Library System Volunteer Interest Form



I would like to volunteer at the following library:

- |  |  |
|--|--|
| <input type="checkbox"/> Bay County Public Library<br><input type="checkbox"/> Panama City Beach Public Library<br><input type="checkbox"/> Parker Public Library<br><input type="checkbox"/> NWRLS Mobile Library | <input type="checkbox"/> Bristol: Harrell Memorial Public Library<br><input type="checkbox"/> Hosford: Jimmy Weaver Memorial Library<br><input type="checkbox"/> Port St Joe: Corinne Costin Gibson Memorial Public Library<br><input type="checkbox"/> Wewahitchka: Charles Whitehead Library |
|--|--|

Volunteer position(s) I'm interested in (check all that apply):

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Adult Literacy Tutor               | <input type="checkbox"/> Mobile Library Volunteer      | <input type="checkbox"/> Program Assistant   |
| <input type="checkbox"/> English as a Second Language Tutor | <input type="checkbox"/> Shelver (Adult Services)      | <input type="checkbox"/> Bookstore Assistant |
| <input type="checkbox"/> Local History Assistant            | <input type="checkbox"/> Teen Shelver (Youth Services) | <input type="checkbox"/> Tech Tutor          |

I am available to volunteer:

- M    Tu    W    Th    F    Sa    Su                     
  AM    PM

<b>PERSONAL DATA</b>	<b>Name</b>	
	Last	First
	Middle	
	<b>Present Address</b>	
	No. & Street	City
	State	Zip Code
	<b>Permanent Address (if different from above)</b>	
No. & Street	City	
State	Zip Code	
<b>If Seasonal Resident, length of stay:</b>		
<b>Telephone</b>	<b>Alternate Telephone</b>	
<b>Email address</b>	<input type="checkbox"/> Yes, I would like to sign up for the library's monthly digital newsletter.	
<b>INTERESTS &amp; SKILLS</b>	<b>Have you ever volunteered for us? If yes, give name used and location of library.</b>	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<b>Do you have an NWRLS library card?</b>	<b>Are you over 18 years old? Volunteers must be at least 14 years old.</b>
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>What skills, abilities, and interests do you have?</b>	
<b>If volunteer service is for school, name of school:</b>		
<b>Total hours needed</b>	<b>Date hours are to be completed</b>	

*Thank you for your interest in volunteering at the library. When a position is available, you will be asked to complete a Volunteer Application Form, and a background check will be completed.*

NWRLS Headquarters: Bay County Public Library ▪ 898 West 11<sup>th</sup> St ▪ Panama City, FL 32401  
(850) 522-2100 ▪ [www.nwrls.com](http://www.nwrls.com)



**For Library Use Only**

Date enrolled: \_\_\_\_\_ Library: \_\_\_\_\_  
Date withdrawn: \_\_\_\_\_ Department: \_\_\_\_\_