# Policies of the Albion Municipal Library and Heritage Center Section 2 – Library Interactions

### Policy Section 2.5 Volunteers

In keeping with the library's purpose of serving the community, and in recognition of our status as a community-funded institution, the board welcomes and enthusiastically encourages individuals to interact through library volunteerism and also to participate in the Friends of the Library group.

Library volunteers will be recruited by the library director, library staff, Board members and/or Friends group, cooperatively, on either a one-time project or a long-term, scheduled basis. Volunteers will be supervised and trained as needed to do specific non-professional tasks (unless said volunteer has specific professional skills). Records of individual and total volunteer hours will be kept to assist the board in evaluation of library activities, and to assist the board in acknowledging individuals for their service. Volunteer service will be recognized annually.

All volunteers must fill out an application form – see example. Volunteers must be at least 14 years of age. Forms for persons under age 18 must also be signed by a parent/guardian. Hours worked by minors must comply with current lowa Department of Labor laws.

#### **INSURANCE CARRIED**

Albion Municipal Library & Heritage Center recognizes and appreciates the hard work and unique talents that volunteers offer throughout the year. The Library also recognizes the risk of injury that can be a part of any activity. For that reason, the City of Albion carries general liability insurance for its departments (the library is one of its departments) which would provide coverage to a volunteer in the event of injury while performing an assigned task. (An *assigned task* is defined by the library director or trustee as part of an already-established list of work.)

ADOPTED: 05-'15 REVISED: 09-'16 REVIEWED: 10-'18, 12-'20

## **Albion Municipal Library and Heritage Center**

400 N Main St, Albion, Iowa 50005 ... 641-488-2266

## **Volunteer Application**

- To be an active Library Volunteer, one must have an application of file.
- All information will be kept confidential, but do know the Library Board of Trustees will conduct background checks for the purpose of public safety.

### **PLEASE PRINT**

PERSONAL INFORMATION:	
First Name	M.I Last Name
Street Address	City
State Zip code _	
Mailing Address if different from above:	
Primary Phone:	Other Phone:
Email address:	
<ul> <li>Volunteers must be a minimum of 14</li> <li>If one is between 14-17 years, a pare</li> </ul>	,
Date Of Birth:/	
Driver's License #	from State of
<b>Emergency Contact Information:</b>	
Name:	<del></del>
Primary Phone:	
Secondary Phone:	
Availability: I prefer the following days/	times:
Monday Tuesday Wednesday	Thursday Saturday
Morning Afternoons Eve	enings

Please turn to back of page.

# Please indicate any volunteer opportunities you would be most interested in:

0	Help return items to the shelves
0	Work in Heritage Room
0	Apply labels to new materials
0	Apply book jackets to new materials with paper covers
0	Assist with grant writing
0	Light housekeeping (dust, clean entryways etc.)
0	Decorate for seasonal changes or holidays
0	Clerical projects ie. prepare mass mailing
0	Clean/Repair damaged DVD's with our cleaning machine
0	Garden (watering, pruning plants)
0	Assist with scheduled programs (If you prefer an age level, please indicate here)
0	Be a guest reader for our children's story time events
0	Put up/Take down messages on the Library Marquee
0	Perhaps you have an interest/hobby you would be willing to teach or share with others?
0	Perhaps you have other skills or background that may be helpful you want to inform us of.
Volunt	**************************************
	and I will not be paid for my services as a volunteer. I understand the library is a smoke-free, drug-free environment and I will not participate if I'm under the of alcohol or illegal drugs. I'm aware that a criminal background check/history can be run from the information I have provided on the front of this form.
-	agree to fully release, indemnify, defend and hold harmless the City of Albion, the Albion Municipal Library and Heritage Center, and any of their trustees oyees from and against any and all liability, loss, damage expense or costs arising in any way out of my volunteer activities.
	and that all library users have a legal right to privacy. Any and all information pertaining to anyone's use of the Albion Municipal Library and Heritage Center eld as strictly confidential.
Insuranc	ce ce
Insurance	unicipal Library & Heritage Center recognizes the risk of injury that can be a part of any activity. For that reason, the City of Albion carries <i>General Liability</i> for its departments (the library is one of its departments) which would provide coverage to a volunteer in the event of <i>injury while performing an assigned assigned task</i> is defined by the library director or trustee as part of an already established list of work.)
	EAD THIS DOCUMENT IN ITS ENTIRETY, AND UNDERSTAND THAT CERTAIN LEGAL RIGHTS ARE OR MAY BE FORFEITED BY VOLUNTARILY SIGNING THIS ENT BELOW.
Signature	:: Date:
(If under t	the age of 18) Parent/Guardian Signature: Date: