

Volunteer Policy, New Brunswick Free Public Library

Approved Wednesday, October 27, 2004

A volunteer is anyone, 16 years or older, who assists on a regular basis with the activities at the New Brunswick Free Public Library without financial compensation. The Library Director may make exceptions to the age requirement.

A student intern is any student who performs volunteer work as part of a school program for academic credit. Individual scouts working on awards are also classed as student interns.

Volunteers working with the Friends and members of the Friends of the New Brunswick Free Public Library working on Friend's projects are volunteering for the Friends and not for the library. However, the library reserves the right to decline the services of any member or volunteer working with the Friends.

The library uses volunteers to supplement the efforts of staff in providing quality service, to encourage people to become familiar with the library and its services, and to support library fundraising activities. Volunteers supplement and do not replace the work of staff. The staff and Board will find ways of formally and informally recognizing volunteers throughout the year.

Nothing in this policy creates a contract between the volunteer or intern and the library or the City of New Brunswick. Both the volunteer and the library can terminate their association at any time, for any reason, without any cause being stated.

Neither the City nor the library provides any medical, health, accident or worker's compensation benefits for any volunteer. Pre-approved expenses may be reimbursed.

Prior to volunteering, applicants must meet with the Library Director or his designee and complete an application for volunteer work. The library may check background and references and has the absolute right to decline anyone as a volunteer without cause or statement of reason.

Illustrative examples of volunteer work include: shelving books, processing materials, storytelling, helping to prepare for programs, maintenance of periodicals, and public relations activities. The hours of volunteer service are determined by the supervisory staff member in discussion with the volunteer. Volunteers must arrive when scheduled or call the library if they will be absent. Except with prior approval, volunteer work must be completed within normal library hours. Volunteers must follow all library policies and procedures especially those relating to the confidentiality of library records.

Recruitment of volunteers is the responsibility of the Library Director. Volunteers work directly with library staff to receive training and complete projects. All volunteers will be assigned one primary staff member to guide them in their work; however, staff members may offer guidance to any of the volunteers.

Student interns will be sought by the appropriate librarians through contacts in area schools and colleges when their activities will benefit the library or librarianship. A job description stressing the value of the project for both student and the library will be tailored for each school program that may offer student interns. The librarian who shapes an individual project will be responsible for the training and supervision of the student intern.

Application to Volunteer (Please type or print clearly in ink)

Name _____ Social Sec. # _____

Address _____ City _____ County _____ Zip _____

Home Telephone _____ Daytime Telephone _____

Email _____ Birth Date (if under 18)* _____ Felony Conviction (Yes/No)† _____

Do you have any physical defects that preclude you from performing certain kinds of work? _____

Education

| | Name and Location | Dates Attended | Course of Study /Degree Earned | Last Year Completed | Grad. (Yes/No) |
|-------------|-------------------|----------------|--------------------------------|---------------------|----------------|
| High School | | | | 1 2 3 4 | |
| | | | | | |
| College | | | | 1 2 3 4 | |
| Grad. Sch. | | | | | |
| Other | | | | | |

Employment History (Attach extra sheets if necessary, cover last five years). Most recent first. ‡

| Employer, Address, & Telephone Number | Dates | Describe Duties & List Immediate Supervisor | Reason for Leaving |
|---------------------------------------|-------|---|--------------------|
| | | | |
| | | | |
| | | | |

If presently employed, may we inquire of your present employer? Yes ___ No ___.

Is this volunteer work a program or requirement of another institution or agency. Yes ___ No ___. If so, specify agency and contact information? _____

Other training, experiences, language abilities, computer qualifications, and skills _____

* If under 18, Parent or Guardian must sign here _____

† If yes, attach details including date, place, charge, and disposition.

‡ Include job-related military service. You may exclude any organizations that indicate race, color, religion, gender, national origin, disability, or other protected status.

References: Name, Address, and Telephone Numbers. List 3 (non-related).

1. _____

2. _____

3. _____

Additional Comments: _____

I certify that the information set forth in this application is true and complete to the best of my knowledge.

Date _____ Signature _____

Liability Release

To Whom It May Concern:

As an applicant to volunteer with the New Brunswick Free Public Library, I understand that a thorough background investigation will be conducted. I hereby authorize the custodian of any information related to my previous employment, driving record, education, residence, criminal convictions, credit standing, or character, to release said information to the person or agency identified herein, unless restricted by law. This authorization is made voluntarily, for the purpose of volunteering. Upon receipt of this document, please release information directly related to the categories shown, and to which you have direct knowledge or documented evidence. I agree to hold harmless any individual or agency involved with the authorized release of legitimate information. Thank you for your cooperation.

Signed: _____

Full Name (print or type) _____

Address _____

City, State, Zip Code _____

Telephone Number _____

Social Security Number _____ Drivers License #, State of Issue _____