

VOLUNTEER POLICY

Updated May 14, 2020; Updated July 11, 2024

A volunteer of the Wilberg Memorial Public Library of Osceola (WMPL) supports the efforts of our paid library staff to provide quality library collections, services, and programs; serves as a method for area residents to become familiar with the library; and creates opportunities for individuals to feel personal satisfaction while performing a valuable service to the community.

A volunteer is a person who performs tasks for WMPL without wages, benefits, or compensation (including travel expenses) of any kind.

Volunteers are recognized by the public as representatives of the library and shall be guided by the same work and behavior codes as employees. They shall follow all enforced library policies, perform duties as requested by the library staff, and be respectful of all library patrons and staff.

Potential volunteers must fill out a Volunteer Application (see attached) and will only be accepted with the consent of the Library Director and will be trained by the Circulation Manager or other appointed staff. The Library Director may dismiss volunteers.

Minor children may only work as volunteers with the consent of a parent or legal guardian.

END OF POLICY



Volunteer Application

Name:
City/State:
Home Phone: Cell Phone: Availability: What days and times are you available to volunteer? Mon: _9AM-12PM12-3PM3-6PM Wed: _9AM-12PM12-3PM3-6PM Thur: _9AM-12PM12-3PM3-6PM Fri: _9AM-12PM12-3PM3-6PM Storytime Assistant Computer Instruction/Help Storytime Assistant Shelving/Other library duties Clerical Assistant Processing new items Sharing a Special Skill as a Program
Cell Phone: Availability: What days and times are you available to volunteer? Mon: _9AM-12PM12-3PM3-6PM Tue: _9AM-12PM12-3PM3-6PM Wed: _9AM-12PM12-3PM3-6PM Thur: _9AM-12PM12-3PM3-6PM Fri: _9AM-12PM12-3PM3-6PM Storytime12-3PM3-6PM Sat: Shering a Special Skill as a Program
Availability: What days and times are you available to volunteer? Mon:9AM-12PM12-3PM3-6PM Tue:9AM-12PM12-3PM3-6PM Wed:9AM-12PM12-3PM3-6PM Thur:9AM-12PM12-3PM3-6PM Fri:9AM-12PM12-3PM3-6PM Sat:9AM-12PM Interests How would you like to help? Friend of the Osceola Library Computer Instruction/Help Storytime Assistant Summer Help Special Event Assistant Processing new items Sharing a Special Skill as a Program
What days and times are you available to volunteer? Mon:9AM-12PM12-3PM3-6PM Wed:9AM-12PM12-3PM3-6PM Thur:9AM-12PM12-3PM3-6PM Fri:9AM-12PM12-3PM3-6PM Sat:9AM-12PM Interests How would you like to help? Friend of the Osceola Library Storytime Assistant Special Event Assistant Special Event Assistant Clerical Assistant Sharing a Special Skill as a Program
Wed:_9AM-12PM12-3PM3-6PMThur:_9AM-12PM12-3PM3-6PMFri:_9AM-12PM12-3PM3-6PMSat:_9AM-12PMInterests9AM-12PM9AM-12PMHow would you like to help?Computer Instruction/HelpFriend of the Osceola LibraryComputer Instruction/HelpStorytime AssistantSummer HelpSpecial Event AssistantShelving/Other library dutiesClerical AssistantProcessing new itemsSharing a Special Skill as a Program
Fri:
InterestsHow would you like to help?Friend of the Osceola LibraryStorytime AssistantStorytime AssistantSpecial Event AssistantClerical AssistantSharing a Special Skill as a Program
Special Skills or Qualifications Summarize special skills and qualifications you have acquired from employment,
previous volunteer work, or through other activities, including hobbies or sports Other Questions: Is this work court-ordered? If yes, please explain.

If you are under 18 years old, what is your age? (Volunteers under the age of 18 must have a signed parental consent.)_____

Wilberg Memorial Public Library - www.osceolapubliclibrary.org - 715-294-2310 - 310 Chieftain St., Osceola, WI 54020



Person to Notify in Case of Emergency:

Name:
Address:
City/State:
Home Phone:
Cell Phone:
Agreement and Signature: By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. Name (printed):
Signature:
Date:
Signature of Parent (if volunteer is under 18 years of age):

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.