



720 First Ave., Berwyn, PA 19312-1769  
610-644-0138  
<http://www.easttownlibrary.org>

## APPLICATION FOR VOLUNTEER POSITION

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Education: \_\_\_\_\_

Previous Work Experience: \_\_\_\_\_

\_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

\_\_\_\_\_

Special Skills and Interests:

\_\_\_\_\_

When are you available to volunteer?

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Please give two references: (Name, address and phone number, please)

1. \_\_\_\_\_

2. \_\_\_\_\_