



**MARION COUNTY LIBRARY VOLUNTEER APPLICATION
- ADULTS (18 YEARS OR OLDER)**
308 Old Main Street Yellville, AR 72687
870-449-6015
marcolibrary.org

Date: _____

INFORMATION:

Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____ (Cell/Home/Work)

Email: _____

Emergency Contact: _____ Phone Number: _____

EDUCATION/EXPERIENCE:

High School/GED: (circle one) Yes No

Previous Volunteer Experience: _____

SKILLS:

Computers: (circle all that apply) Word Windows Excel Gmail Internet Browsers

Other Skills and Interests: _____

Areas of Interest: (Please check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> On-Call, Special Events | <input type="checkbox"/> Craft Assembly | <input type="checkbox"/> Check-Ins |
| <input type="checkbox"/> On-Call, Weekends | <input type="checkbox"/> Preparing Books | <input type="checkbox"/> General Volunteering |
| <input type="checkbox"/> Shelving | <input type="checkbox"/> Children's Area (General) | <input type="checkbox"/> Other |



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VOLUNTEERING DETAILS:

Preferred Days: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday	Times Available: Morning from _____ to _____ Afternoon from _____ to _____	Availability: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Special Project(s) Times/Seasons Not Available: _____
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I, _____, understand that by submitting a Volunteer Application, I will be required to submit to a background check. This test will come at no cost to myself. Without submitting to a background check, or providing a previous background check, I will not be able to volunteer at the Marion County Library.

Yes No

Volunteer Signature

AUTHORIZATION FOR BACKGROUND INVESTIGATION

By signing below you authorize the obtaining of investigative consumer reports by the Company at any time after receipt of this authorization. To this end, you authorize any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested about you by National Crime Search, LLC and/or the Company.

You understand that the scope of your authorization is not limited to the present and, if you are accepted, will continue throughout the course of your volunteering period and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

Print Full Legal Name:	
Other or Former Names (please print):	
Date of Birth*:	
Social Security Number:	
Address:	
City:	
County:	
State:	
Zip Code:	
Driver's License number:	
State License issued:	
Name on License (if different than legal name):	
Email Address:	
Phone Number:	
Signature:	
Parent/Guardian signature **:	
Date:	

***This information will be used for background screening purposes only and no other purpose.**

****If the applicant is under 18 years old, both the volunteer and a parent/guardian must sign the form.**

FCRA NOTICE – BACKGROUND INVESTIGATION

In connection with your application to become a volunteer with _____ (the "Company"), this notice is intended to inform you that an investigative consumer report will be obtained on you from a consumer reporting agency for volunteer purposes. These purposes may include for acceptance, retention, promotion or reassignment. The report may contain information about your character, general reputation, personal characteristics and mode of living, which may be based on personal interviews with sources such as your neighbors, friends or associates. The report may also contain information about you relating to your criminal information or history, credit history, driving and/or motor vehicle records, verification of your education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to the Company and our background screening provider, National Crime Search, LLC, 3452 E. Joyce Blvd., Fayetteville, AR 72703 (888-527-3282). For information about National Crime Search, LLC's privacy practices, see www.nationalcrimesearch.com.

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