**Volunteer Policy**

**Henderson Memorial Public Library**

**54 E. Jefferson Street**

**Jefferson, Ohio 44047**

**PH(440)576-3761 FAX(440)576-8402**

[**http://www.henderson.lib.oh.us**](http://www.henderson.lib.oh.us/)

Purpose: To provide supplemental support and/or services to the library and paid library staff.

Activities: May include (but not limited to) cleaning and maintaining equipment, making copies, assisting with library programming, maintaining daily book sale materials, sorting and packing donation materials, recycling, library displays and decorations, maintaining clean atmosphere in and around the library, and other special projects approved by the Director.

Qualifications: Ability to work with people harmoniously & willingness to learn new skills. Must be able to lift library materials as needed, set-up of tables, chairs, etc. for programming needs, and present a good work ethic within the library environment.

* A volunteer is someone who provides services without remuneration in wages, benefits, or other compensation (including travel expenses).
* A volunteer must fill out a Volunteer Registration Form. All minor-aged volunteers (under the age of 18) must also have the signature of a parent or legal guardian.
* A volunteer is not covered by the library’s workers compensation coverage.
* A volunteer provides services “at will”. This means the library or the volunteer can terminate his/her services at any time.
* A volunteer shall adhere to library policies and procedures and follow the same behavior as paid library staff.
* A volunteer shall maintain confidentiality of library patrons.
* Volunteers shall be approved by the library Director or his/her designee.
* Volunteers report to the library Director or his/her designee.
* Volunteer references will be checked by the library Director or his/her designee.
* If a volunteer is unavailable for the date or time they are scheduled, they should notify the Director or his/her designee as soon as possible.

Attachments: Volunteer Registration Form (attachment 1), Volunteer Log Sheet (attachment 2)

Revised: October 20, 2014

Approved by Henderson Memorial Public Library Board of Trustees

**Volunteer Registration Form – attachment 1**

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

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

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

**City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**References**

**Name Phone Relationship**

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

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**For Library Use:**

**References checked and approved by:\_\_\_\_\_\_\_\_(staff initials)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date)**

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**Do you have a vehicle that can be used for volunteering if necessary? Y N**

**For Library Use:**

**Proof of driver’s license and car insurance\_\_\_\_\_\_\_\_\_\_\_(staff initials)**

**Attach copies to registration form.**

**Special Skills:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have read the Volunteer Policy and agree to comply with the terms and to stay within the bounds of the volunteer responsibilities entrusted to me.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Volunteer Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian Signature (required for minors) Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approved Library Signature Date**

**Volunteer Daily Log Sheet – attachment 2**

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

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