



950 Warrior Lane  
Waukee, IA 50263  
515-978-7944  
waukeepubliclibrary.org

## Volunteer Application

APPLICANT INFORMATION			
Full Name:			
Current Address:			
Phone:		E-mail:	
Current Grade Level:	Date:	Do you want to be in TAB?	Best way to contact you:
Why do you want to volunteer at the Waukee Public Library?			
By signing this application, I agree that I have read and will abide by the Waukee Public Library's Volunteer Expectations.		Signature:	

EMERGENCY CONTACT INFORMATION	
Parent/Guardian Name:	
Phone:	E-mail:
By signing this application, I agree to allow the applicant to volunteer at the Waukee Public Library.	Parent/Guardian Signature:
The Waukee Public Library may take photos of our volunteers to promote the library in local resources or on our website and social media. Granting photo permission is NOT a requirement to become a library volunteer. Do you give your permission to the library to use your teen's photograph in library promotions?	