Tazewell County Public Library
Volunteer Application Form

Bluefield Branch
108 Huffman Drive
Bluefield, VA 24605

Tazewell Main
310 East Main Street
Tazewell, VA 24651

Richlands Branch
102 Suffolk Avenue
Richlands, VA 24641

Name ________________________________ Date _______________
Address _________________________________________________________
Phone ___________________ Age (if under 18) ______________
If Student, Name of School _________________________________
If Employed, Name of Employer ________________________________

How many hours can you volunteer weekly? _____
Can you volunteer evenings? _____

Days/Hours Available:
No Pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____
Special Interests, Talents, or Skills:

Educational Background And/Or Experience:

Student Volunteer Permit
(to be signed by parent or guardian if applicant is under 18)

Date: ________________
___________________________ has my permission to work as a Volunteer in the Tazewell County Public Library.
__________________
(Signature)                                      (Relation)
__________________
(Phone)