

Sargent Memorial Library Volunteer Form

Please write legibly

APPLICANT INFORMATION			
Name		Date	
Address			
Home Phone		Cell Phone	
Email			
Entering ABRHS Grade			
DAYS OF WEEK AND TIMES AVAILABLE (1-2 HOUR SLOT[S] WILL BE MUTUALLY SCHEDULED). Library hours: Monday –Thursday, 10am-8pm. Saturday, 10am-3pm. (Closed Saturdays in July & August)			
Monday		Thursday	
Tuesday			
Wednesday		Saturday	
Dates volunteer will be unavailable			
WORK PREFERENCE & COMMITMENT			
Are you willing to work 1-2 hours for a minimum of 12 weeks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you willing and able to shelve books?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you interested in helping with children's crafts, LEGO club or other programs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you interested in weeding the flowerbeds around the library in good weather?	Prefer <input type="checkbox"/>	Agreeable to <input type="checkbox"/>	Would rather not <input type="checkbox"/>

**Please complete the form and return to:
SARGENT MEMORIAL LIBRARY
427 MASS AVE,
BOXBOROUGH, MA 01719**

QUESTIONS? Contact us at 978-263-4680