



West Lincoln Public Library Volunteer Application Form

Personal Information

Last Name:	First Name:
Address:	Phone: Email:
Date of Birth:	Emergency Contact Name: Emergency Contact Phone:

Education:

Work Experience:

Volunteer Experience:

Why would you like to volunteer with West Lincoln Public Library?

Preferred Library Location (circle all that apply) Caistorville Smithville Wellandport

All positions may not be available at all locations. Please check all that apply.

Availability	M	T	W	T	F	S/S
Morning						
Afternoon						
Evening						

References

Name:	Phone:
Name:	Phone:

Declaration

I declare the above information to be true and complete, and authorize the West Lincoln Public Library to solicit references from those named above.

Signature:	Date:
Parent/Guardian Signature:	Date:

Parent/Legal Guardian's signature is required if volunteer is under the age of 16. By signing, the parent/legal guardian recognizes the volunteer as a minor pursuant to the Age of Majority and Accountability Act and that they have permission to serve as a volunteer with the Library.

Volunteer Confidentiality Agreement

Volunteer will perform services for West Lincoln Public Library which may require West Lincoln Public Library to disclose confidential and proprietary information ("Confidential Information") to Volunteer. (Confidential Information is any information of any kind, nature, or description concerning any matters affecting or relating to Volunteer's services for West Lincoln Public Library or the Township of West Lincoln, the business or operations of West Lincoln Public Library, and/or the products, drawings, plans, processes, or other data of West Lincoln Public Library).

Accordingly, to protect the West Lincoln Public Library Confidential Information that will be disclosed to Volunteer, the Volunteer agrees as follows:

Volunteer will hold the Confidential Information received from West Lincoln Public Library in strict confidence and shall exercise a reasonable degree of care to prevent disclosure to others.

Volunteer will not disclose or divulge either directly or indirectly the Confidential Information to others unless first authorized to do so in writing by West Lincoln Public Library. Volunteer undertakes to treat confidentially all such information and to not disclose it to any third party either during his employment, except as may be necessary to perform his/her duties, or after termination of his/her employment.

Volunteer will not reproduce the Confidential Information nor use this information commercially or for any purpose other than the performance of his/her duties for West Lincoln Public Library.

Volunteer will, upon the request or upon termination of his/her relationship with West Lincoln Public Library, deliver to West Lincoln Public Library any drawings, notes, documents (electronic or hard copy), equipment, and materials received from West Lincoln Public Library or originating from its activities for West Lincoln Public Library.

West Lincoln Public Library shall have the sole right to determine the treatment of any information that is part or project specific received from Volunteer, including the right to keep the same as a trade secret, to use and disclose the same without prior patent applications, to file copyright registrations in its own name or to follow any other procedure as West Lincoln Public Library may deem appropriate.

West Lincoln Public Library reserves the right to take disciplinary action, up to and including termination for violations of this agreement.

Signature:	Date:
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