



WILLIMANTIC PUBLIC LIBRARY / CHILDREN'S DEPARTMENT

905 MAIN STREET, P.O. BOX 218

WILLIMANTIC, CT 06226

www.biblio.org/willimantic

TELEPHONE (860)465-3082

FAX (860) 465-3083

EMAIL: gzeiba@biblio.org

VOLUNTEER APPLICATION

Name:

Address:

Emergency Contact (including phone number)

School & Grade:

Prior Volunteer Experience: (if any)

References: (other than relatives)

Name: _____ Phone: _____

Name: _____ Phone: _____

What hours/days are you available?

Please tell us something about your hobbies interests or skills:

*Please note that Library volunteers are not covered under the Worker's Compensation policy because they do not meet the definition as employees for the Town.

