



Association Angevine de la Bibliothèque Anglophone
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Volunteer application form

1 – Personal information

Full name _____
 Membership # _____ Age _____
 Address _____ City _____
 Email _____
 Phone _____ Nationality _____

2 – Information

Have you ever volunteered before? If so, where? _____

How did you hear about our volunteers program? _____

Please note the skills, abilities or interests below that are applicable to you:

- | | |
|--|--|
| <input type="checkbox"/> Previous library work | <input type="checkbox"/> Storytelling |
| <input type="checkbox"/> Computer work | <input type="checkbox"/> Arts and crafts |
| <input type="checkbox"/> Typing/ word processing | <input type="checkbox"/> Manage children |
| <input type="checkbox"/> Knowledge of foreign language | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> TOEIC skills |
| <input type="checkbox"/> Business skills | <input type="checkbox"/> Knowledge of English education system |

Do you speak/write in French? _____

Do you speak/write in English? _____

What do you think your weakness is? _____

Is there something you don't want to do? _____

3 – Schedule

When are you available to volunteer at the library?

	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning					
Afternoon					
End of day					

4 – Confidentiality

I understand that in my capacity as an English Language Library's volunteer, I may come into contact with confidential information. I agree to protect this information to the best of my abilities and not to divulge it during or after my service as a volunteer has ended.

Name _____

Signature _____

Date _____