
Computer Savvy Seniors Volunteer Application

Today's Date: _____

First Name: _____ Surname: _____

Are you 55 years of age or older? Please circle one: Yes No

Street Address: _____ Apartment: _____

City: _____ Postal Code: _____

Phone Number: _____ Email: _____

___ Yes, I would like to receive email information about upcoming seniors programs
(non-volunteer opportunities)

Availability

This program will be running on Thursdays with a choice between three shifts. Please circle the time(s) that best fit your schedule:

9:30am to 10:30am

11:00am to 12:00pm

1:00pm to 2:00pm

About You

Please tell us about yourself, including any interests you may have and why you feel you are a suitable candidate for this position. Please continue on a separate page if necessary.

The Personal information on this form is collected under the authority of the Public Libraries Act and the Municipal Freedom of Information and Protection of Privacy Act. This information will only be used for the proper administration of the library and the provision of library services and programs by Milton Public Library. Questions related to the collection of this personal information should be directed to the Deputy Chief Librarian, Milton Public Library, 1010 Main Street East, Milton, L9T 6H7.

Computer Savvy Seniors Volunteer Application continued

References:

Please provide a personal reference using the attached form. **Your application will not be considered unless accompanied by these completed reference form.** Please provide your referee with an envelope in which they can seal the form and sign the closure before they return it to you. Submit your application and the accompanying reference envelope to the staff at the Main Library. The program coordinator will contact you regarding an interview **by November 21st, 2017**. We thank you for your interest in volunteering with Milton Public Library but only those applicants shortlisted for a position will be contacted for an interview.

You are also required to complete and submit the section below. Please read before signing.

I, _____ (applicant) hereby authorize Milton Public Library to solicit a reference from _____ (name of referee) in connection with my application for this volunteer position, and to investigate any statements made in this application. In so doing, I release Milton Public Library and all others from liability in connection with such activities.

I hereby authorize the above named referee to provide a reference in connection with my application for this volunteer position, and release them from any liability in regard to providing that reference.

I hereby confirm that I have provided my referee with the reference form to complete themselves and that they have returned the completed form to me in a signed and sealed envelope, ensuring their confidentiality.

Applicant's signature: _____

Date: _____

Thank You! We appreciate your interest in volunteering with

Milton Public Library

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