ROSEVILLE PUBLIC LIBRARY
Volunteer Policy

1. Volunteers are identified as persons who perform duties or tasks for the Library without wages or benefits. Community service workers shall serve under the same guidelines as other library volunteers. The volunteers described in this policy are separate from the Friends of the Library volunteers who are governed by their own policies and bylaws.

2. Volunteers must complete a volunteer application and background check waiver and be age 12 or older. Volunteers under the age of 18 must have written permission from a parent or guardian to volunteer for the library.

3. Volunteers will not be accepted if there is no suitable service match when skills, interests and schedule are considered. If there is not a volunteer opportunity available, the volunteer will be informed that their application will be kept on file for six months and they will be contacted if something becomes available. Preference will be given to Roseville residents and students of Roseville schools.

4. Volunteers will not substitute for regular staff. They will provide special, unusual or supplemental services and will fulfill specific tasks.

5. Each volunteer is to serve a minimum of one (1) hour and no more than four (4) hours per day.

6. Volunteers are recognized by the public as representatives of the Library and shall be guided by the same work and behavior code as employees.

7. Volunteers will receive instructions regarding the specific task they are assigned. Individuals must be motivated and able to work unsupervised.

8. Volunteers may be discharged with or without cause or notice.

Adopted by the Roseville Public Library Commission January 10, 2005
Revised September 9, 2013
Volunteer Application and Background Check Waiver
Roseville Public Library

Name: __________________________________________________________
Address: ______________________________________________________
City: _________________________ State: ___________ Zip Code: __________
Telephone: _______________ DL#: ________________________________
Date of Birth: _______________ Other names: ______________________
What type of tasks are you interested in? _______________________________

How many hours per week would you like to volunteer? __________________
What days/times are you available? _________________________________
Have you ever been convicted of a felony? __________________________
If so, please explain _______________________________________________

I hereby authorize the Roseville Public Library in conjunction with the Roseville Police
Department and the Michigan State Police to obtain any information concerning me,
including information relating to my reputation, education, employment and physical and
mental health. This information will be used to assist the Library in determining my
qualifications and fitness as a volunteer. I hereby release the Roseville Public Library
and the Roseville Police Department from any liability or damage that may result from
furnishing the information requested above. Further, I hereby expressly waive and
release any special right of access I may have under any statute or the common law to
the information that may be furnished about me to the Roseville Public Library and/or
the Roseville Police Department.

Signature of Volunteer ____________________ Parent’s signature (for volunteers under 18) __________________

Date ________________________________