

A CURRENT TUBERCULOSIS CLEARANCE IS REQUIRED BEFORE VOLUNTEER WORK BEGINS. (Required for volunteer services totaling more than 15 days (not necessarily consecutive) within any calendar year in accordance with Admin. Procedures A9.520

UNIVERSITY OF HAWAI'I LIBRARY
VOLUNTEER INFORMATION FORM

Date _____

Full Name _____ Soc. Sec. No. _____

Address _____
(Street) (City) (Zip Code)

Phone _____ E-Mail _____

Do you have any special training or interests?

What kind of volunteer work would you like to do?

When can you volunteer?

Sun. a.m. _____	Mon. a.m. _____	Tues. a.m. _____	Wed. a.m. _____
p.m. _____	p.m. _____	p.m. _____	p.m. _____
Thurs. a.m. _____	Fri. a.m. _____	Sat. a.m. _____	
p.m. _____	p.m. _____	p.m. _____	

I volunteer my services and understand that I am not an employee of the University of Hawaii and will not be paid.

Signature _____ Date _____

Place of service in the Library _____

Description of work _____

Days and hours of service _____

Starting Date _____

Dept. Head's signature _____ Date _____