

Affidavit—Read each statement carefully before signing.

I certify that all information I have provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteering and may result in my dismissal if discovered at a later date.

I authorize the investigation of any and all statements contained in this application and also authorize any person, school, employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful. I release such persons and organization from any legal liability in making such statements.

I understand I may be required to successfully pass a background check. I hereby consent to a background check as a condition of volunteering. My social security number for the background check:

I agree to abide by Colorado Library Law as it relates to patron privacy.

Date: _____ Signature: _____

Thank you for expressing an interest in our library. We will let you know if our needs meet your interest.

For Library Staff: _____ Background Check _____ Volunteer Agreement