



## VOLUNTEER HANDBOOK 2018

We thank you for your interest in volunteering for the Lyons Regional Library District. Volunteering at your library is a great way to be a part of your community and support the library's mission.

### Mission of the Lyons Regional Library District

The mission of the Lyons Regional Library District is to provide access to quality resources and programs that serve the lifelong cultural, educational, informational, and entertainment needs and interests of people of all ages, abilities, and backgrounds within the Lyons Regional Library District.

### History of the Lyons Regional Library District

On July 1, 2015 the Lyons Regional Library District assumed operational management of the Library from the Town of Lyons.

### Who is a Lyons Regional Library Volunteer?

A volunteer is considered any individual, 12 years or older, who assists with support work at the Lyons Regional Library without pay or expectation of reward.

**Note:** Volunteers are not covered by Lyons Regional Library District workers' compensation insurance.

### Volunteer Rights

- Be carefully interviewed and appropriately assigned with a clear and comprehensive job description
- Receive training appropriate to the volunteer position
- Be provided a safe environment, both physically and emotionally
- Receive feedback on your work
- Support for the volunteer position will be provided when asked for and when appropriate
- To receive recognition for your contribution through some form of appreciation

### Expectations of Volunteers

- A criminal background check may be required
- Respect confidentiality of all patrons, volunteers, and staff
- Follow and respect the rules of the Lyons Regional Library District as well as those of the Town of Lyons and the State of Colorado
- Be committed to the volunteer position you have accepted through punctuality and responsible behavior
- Carry out the specified volunteer job description
- The Lyons Regional Library has the right to refuse or dismiss any volunteer
- Be willing to give feedback or participate in evaluations when asked
- Willing to be accountable and accept feedback
- Acknowledge and follow decisions made by the Director of the Lyons Regional Library District or other designated Library Staff
- Undertake training for the accepted volunteer position

- Notify your supervisor if you can no longer volunteer or complete assigned duties at assigned times such as advanced notification of vacations or prompt notification of illness
- Let Library Staff know when you arrive and when you leave and keep track of the hours you have volunteered

If you have any questions or suggestions, please contact Library Staff at 303-823-5165 or [info@lyonsregionallibrary.com](mailto:info@lyonsregionallibrary.com). Your feedback is always welcome and it helps the Library strengthen its program.

#### References

The Lyons Regional Library District Director and staff are allowed to verify the amount of time and dates a volunteer has served. Staff may also provide a reference for educational purposes. Staff cannot provide a professional reference.

#### Age

The minimum age for volunteers is 12 years old.

#### Personal Appearance

Volunteers, like Library Staff, represent the Lyons Regional Library District. All volunteers are expected to wear a button or lanyard designating their volunteer status when volunteering at the library, if such items are available. Volunteers should dress neatly in clean and presentable clothing. T-shirts with inappropriate messages and endorsements as well as revealing garments are not allowed. Volunteers must present a professional appearance to the public.

#### Attendance

The Director or other such designated member of staff will work with individual volunteers to establish a mutually agreeable schedule. Volunteers are expected to abide by their schedule and to notify their direct supervisor in the event of a change.

Habitual absenteeism may result in dismissal from the volunteer program.

#### Smoking

Smoking of any substance in any manner is not allowed inside the library.

This document was updated June 19, 2017.

Revised October 16, 2018

As a volunteer of the Lyons Regional Library, I, \_\_\_\_\_, have read, understand, and agree to the responsibilities of being a volunteer as outlined in the volunteer handbook. I pledge to:

- Advance the mission and core values of the Lyons Regional Library District
- Arrive on time
- Do my best with the tasks assigned to me
- Accept supervision graciously
- Conduct myself in a manner befitting a representative of the Library
- Do my part to uphold the high standards of Library service

I agree to abide by the following guidelines for confidentiality. I will not discuss a patron's Library Account or personal information. If I have a concern or question, I will bring it directly to my assigned supervisor or contact the Director.

Should a Library patron voice a complaint, describe a conflict, or begin to discuss a problem with me, I will encourage that patron to discuss the issue with the Director or designated Library Staff. I understand that as a volunteer I am neither asked nor expected to address patron's individual concerns.

When participating in a Library work environment, during conversations with Library Staff, I may learn confidential information about the Library's patrons (such as problem with accounts, lost items, overdue fines, borrowing habits). I agree to maintain the highest level of discretion in regard to confidential information, files, or personal data on Library patrons and staff. At no time will I discuss confidential information, files, or personal data with other volunteers or patrons

I understand that volunteers are not covered by Lyons Regional Library District's worker's compensation insurance.

As a volunteer I understand that this handbook is not all-inclusive but is intended to provide me with a summary of volunteer expectations.

I have read, understand, and agree to the responsibilities of being a volunteer as outlined in the Lyons Regional Library Volunteer Handbook.

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Volunteer Signature

Date

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Parent/Guardian Signature

Date

**Volunteer Information:**

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Name

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Phone

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Address

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Email