

HOME DELIVERY PROGRAM POLICY

Effective Date: July 12, 2022 Revised Date:

Purpose

The Home Delivery Program of The Thomas St. Angelo Public Library of Cumberland will enhance the library service by providing delivery of library materials to citizens who are unable to come into the library. This will enable library patrons to continue utilizing the library resources when they are dealing with access limitations.

Eligibility

Applicants must hold a valid MORE Library card. An interview by the Home Delivery Program Coordinator will establish the need for the service and a mutual contract will be agreed upon.

Program

A volunteer picks up books selected by the program coordinator and delivers them to the patron's residence, once every three-four weeks.

Materials Available for Home Delivery Service

All formats of materials are available through the Home Delivery Service. Each delivery will be limited to one bag of materials or approximately 15-20 items. Patrons are responsible for all library materials while in their custody.

Fines/Fees

There is no fee for Home Delivery Service. Overdue fines will not be charged, but the library's standard fee schedule will apply for damaged or lost items.

Environment Required for Delivery

Patrons requesting Home Delivery Service must provide a safe and appropriate environment for volunteers who are delivering materials. Suspension of Home Delivery Service could occur if a volunteer is exposed to any unsafe situations or conditions. A person's repeated failure to abide by this policy could result in termination of Home Delivery Service.

Participant Responsibilities

Participants must:

- Commit to the program for a long term amount of time. (one year)
- Have a valid MORE Library card.
- Live within the city of Cumberland or within one of the four surrounding townships.
- Take part in an interview with the Home Delivery Coordinator.
- Provide contact information for themselves and a relative or neighbor.
- Notify Home Delivery Program Coordinator/Volunteer of any changes or need for cancellation of delivery appointment.
- Communicate any specific requests for materials to either the Home Delivery Program Coordinator or Volunteer.



Home Delivery Program Survey

Name:	Date of Birth:
Street Address:	Phone:
City:	Zip:
Relative/Neighbor:	Phone:

Responsibilities of Program Participant

- I declare that I am unable to get to the library at this time to make my own selections.
- I understand that I am responsible for payment of lost or damaged items.
- My books and materials are due every three weeks.
- I will notify the library of any changes of address.
- I understand that my selections will be confidential.
- •

Signature: _____

Date: _____

Certified by:	
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Route:_____

Please complete the reading preference information on the back of this sheet. It will help us in making selections of library materials.

Reading Preference Information

0	Adventure stories	Other reading interests:
0	Bestsellers	
0	Bible, religious	
0	Biographies	
0	Christian Fiction	
0	Classic Novels	Favorite Authors:
0	Cooking & Homemaking	
0	Current Events	
0	Detective & Mystery	
0	Fine Arts	
0	Genealogy and Local History	Hobbies:
0	Health	
0	Historical Fiction	
0	History	
0	Humor	
0	Music	Dislikes:
0	Nature	
0	Philosophy & Psychology	
0	Poetry	
0	Politics & Government	Special Interest # Items/Del.
0	Romance	
0	Science	Books Large Print
0	Science Fiction	Books Paperback
0	Short Stories	Books Regular
0	Sports	Books on CD
0	Travel	Music CDs
0	True Crime	DVDs
0	War Stories	Magazines
0	Westerns	Other:



Home Delivery Volunteer Survey

Name:	Date of Birth:
Street Address:	Phone:
Email:	

- I am willing to make a commitment of at least one year to the program.
- Attendance at any required training sessions or meetings.
- Provision of Proof of Insurance.
- Background check.
- I will respect the confidentiality of customer's selection of the library materials.
- I will comply with directives for delivery as discussed in training. (Not a social visit, no shopping or delivery of things other than library materials, no transportation of customers, etc.)

Signature:	Date:	
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Certified by: _____ Route: _____