

# Teen Volunteer Application

(Ages 12-17)

Date \_\_\_\_\_

## General Information

<b>Last Name</b>		<b>First Name</b>		<b>Grade</b>	
<b>Address</b>					
<b>Home Phone</b>		<b>Cell</b>		<b>Email</b>	
<b>Emergency Contact</b>			<b>Phone</b>		

## Volunteer Experience and Skills

**What skills or experiences do you have that would be beneficial as a library volunteer?**

**Why would you like to volunteer at the Hartland Public Library?**

## Schedule

**Please list the times you would be available to volunteer.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Morning</b>						
<b>Afternoon</b>						
<b>Evening</b>						

**How many hours are you available to volunteer each week?** \_\_\_\_\_ **Each month?** \_\_\_\_\_

**Additional comments:**

## Volunteer Opportunities

**Please check areas of interest** (Note: Opportunities are subject to availability and library need)

<input type="checkbox"/> Shelf Reading/Adopt-a-Shelf	<input type="checkbox"/> Shelving/Straightening Shelves
<input type="checkbox"/> Dusting/Light Cleaning	<input type="checkbox"/> Teaching Adults How to Use Computer/Cell phone
<input type="checkbox"/> Local History	<input type="checkbox"/> Cleaning DVDs & CDs
<input type="checkbox"/> Craft Preparation	<input type="checkbox"/> Helping at Book Sale/Special Events

If you could do any task at the library, what would it be?

## References

**Please provide contact information for someone who will recommend that you will be a good volunteer.  
Your reference must be over 18 years old and not a member of your family.**

Name	Relationship	Ph or email
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In signing this form, I acknowledge that my services for the library are free and are intended as a contribution of public service for the library, its patrons, and the community. I agree to abide by all the rules of conduct governing the staff of the library in performing my services. As a volunteer, I hereby acknowledge that I will perform my services in good faith and to the best of my ability under the general guidelines provided.

I confirm that I am under 18 years old and understand my eligibility as a volunteer is contingent upon the availability of work. If I cannot come in for an assigned shift, I will notify the Volunteer Coordinator as soon as possible.

The Hartland Public Library appreciates your willingness to volunteer your services to assist the library, its patrons and the community. Personal information collected for these purposes will only be used internally at the library and will only be disclosed to you, except if the law requires disclosure to a third party. Files are kept one year from the date of inactivity.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please return this application to the Reference Desk at the Hartland Public Library. Questions may be directed to Sara Swanson, Reference Librarian & Volunteer Coordinator, at (262) 367-3350 or [swanson@hartland.lib.wi.us](mailto:swanson@hartland.lib.wi.us)