

# WAUTOMA PUBLIC LIBRARY TEEN VOLUNTEER APP

YOUTH 12-18



## GENERAL INFORMATION

Please print legibly

Last Name, First Name, MI

Email

Address

City

State

Zip Code

Home Phone

Cell

Date of Birth (mm/dd/yyyy)

Current School

Grade

Are you volunteering to complete a Community/ Volunteer Service requirement?

Do you participate in extracurricular activities? *If yes, please list activities:*

## BACKGROUND INFO

Why do you want to volunteer at the Wautoma Public Library?

Previous volunteer experience and skills/talents you would like to share:

Skills and talents you'd like to learn:

## SCHEDULE

Please check the times you would be available to volunteer

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening						

## PARENT/GUARDIAN AND EMERGENCY CONTACT INFO

Please print legibly

Name	Relationship to you	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	Relationship to you	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

## VOLUNTEER OPPORTUNITIES

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

- Pop- Up Libraries**  
Assist library staff with outreach at events or assisted living homes.
- Program assistance- Circle preferred age(s): Children Teen Adult**  
Assist with activities, preparation, cleanup, and room monitoring during programs as needed
- Light Housekeeping**  
Dust the bookshelves, clean toys, etc.
- Collection assistance**  
Assist with selecting materials to add to the collection, locate materials to be withdrawn, sort donations
- Publicity**  
Create displays and posters to highlight different parts of the library's collection.
- Tech Help**  
Helping patrons learn how to use their smartphones, tablets, laptops, etc.
- Book search and shelving**  
Search for books on the holds list and shelve returned books
- Special Projects**  
Assist staff with short-term projects as needed
- I would like more information about the Friends of the Wautoma Public Library**

## PERMISSION TO PARTICIPATE/VOLUNTEER AGREEMENT

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 the rules of conduct governing the staff of the library in performing my services. I agree to keep confidential any library information to protect and respect the individual's right to privacy. 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 understand my eligibility is contingent upon a background check, an interview, and the availability of work. I will commit to volunteering for a minimum of four months and will notify the volunteer coordinator or director should I decide to stop volunteering after the initial period. If I cannot work an assigned shift, I will notify the library as soon as possible.

The Wautoma 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 \_\_\_\_\_