

AUBURN PUBLIC LIBRARY

TEEN VOLUNTEER APPLICATION

Today's date _____

GENERAL INFORMATION	NAME		BIRTHDATE/AGE
	MAILING ADDRESS		CITY
	PHONE	EMAIL	

EMERGENCY CONTACT	NAME		RELATIONSHIP
	ADDRESS (if different from above)		
	PHONE	EMAIL	

EDUCATION	CURRENT SCHOOL	GRADE
	SCHOOL OR COMMUNITY ACTIVITIES	
	SPECIAL SKILLS	

PAST EXPERIENCE	List any current/past volunteer assignments you have held:	
	VOLUNTEERED FOR	DATES
	JOB DESCRIPTION	
	VOLUNTEERED FOR	DATES
	JOB DESCRIPTION	

AREAS OF INTEREST	Reasons for volunteering (check all that apply): <input type="checkbox"/> School credit/assignment <input type="checkbox"/> School community service requirement Total # of hours required _____ Date service must be completed _____ <input type="checkbox"/> Personal enrichment <input type="checkbox"/> Interest in the library and/or library work <input type="checkbox"/> Court ordered requirement Offense committed _____ Total # of hours required _____ Date service must be completed _____ <input type="checkbox"/> Other _____
	The following are some tasks to which we assign our volunteers. Please check those which you could see yourself doing as a VolunTeen (check all that apply): <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Shelf reading </div> <div style="width: 50%;"> <input type="checkbox"/> Dusting shelves/straightening </div> <div style="width: 50%;"> <input type="checkbox"/> Creating displays </div> <div style="width: 50%;"> <input type="checkbox"/> Designing flyers (program & display) </div> <div style="width: 50%;"> <input type="checkbox"/> Media Lab assistance </div> <div style="width: 50%;"> <input type="checkbox"/> Program assistant </div> <div style="width: 50%;"> <input type="checkbox"/> Book reviewing </div> <div style="width: 50%;"> <input type="checkbox"/> Other _____ </div> </div>

AVAILABILITY	Preferred Days	Preferred Hours
	Length of commitment you agree to make: <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> 3 months </div> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> 6 months </div> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> School year (Sept-June) </div> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Other (specify) _____ </div>	

We ask all VolunTeens to also participate in our Teen Advisory Board (to help plan & implement programs and activities). Is this something you would be willing to do? ☐ Yes ☐ No ☐ Maybe

OFFICE USE ONLY	
Orientation/Interview done by	Date
Comments	
Start date	End date
Comments	

TEEN VOLUNTEER APPLICATION SIGNATURE PAGE

Volunteers 18 years and older

In connection with my voluntary involvement in activities undertaken for, and with the participation and support of the Auburn Public Library, I hereby agree, for myself, my heirs, assigns, executors and administrators to release, discharge, and hold harmless the City of Auburn and the Auburn Public Library, Inc., and Board of Trustees, its employees, agents, and volunteers from all claims, demands, actions or any cause for suit arising from injuries sustained to my person and/or property as a result of my involvement in such activities, whether or not resulting from negligence. I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk, and that I have read the foregoing terms and conditions of this release. In addition, I agree to keep confidential any customer information or Library records I may encounter. I understand that the Auburn Public Library does not provide medical coverage or other employee benefits for volunteers. If qualified for library service, I agree to abide by the rules and regulations of the Auburn Public Library.

Volunteer signature: _____ **Date:** _____

Volunteers 12-17 years of age

By my signature below, I verify that I am a parent or guardian of the participant and I hereby consent to his/her voluntary participation with the Auburn Public Library. In connection with his/her voluntary involvement in activities undertaken for, and with the participation and support of the Auburn Public Library, I hereby agree, for myself, my heirs, assigns, executors and administrators to release, discharge, and hold harmless the City of Auburn and the Auburn Public Library, Inc., and Board of Trustees, its employees, agents, and volunteers from all claims, demands, actions or any cause for suit arising from injuries sustained to his/her person and/or property as a result of my involvement in such activities, whether or not resulting from negligence. I hereby attest that his/her attendance and involvement in such activities is voluntary, that he/she is participating at his/her own risk, and that I have read the foregoing terms and conditions of this release. I understand that the Auburn Public Library does not provide medical coverage or other employee benefits for volunteers.

Parent

signature: _____ **Date:** _____

If qualified for library service, I agree to abide by the rules and regulations of the Auburn Public Library.

Volunteer signature: _____ **Date:** _____

Please return this form to the Reference Desk on the second floor. All teen volunteers (ages 12-18) will have a formal interview/orientation session with the Teen Librarian at a mutually convenient time. This should take 30-60 minutes.