

TV Application at SPL

Teen Volunteers @ Smith Public Library

Inspire
Inform
Interact
@ SPL

Date: _____

Name: _____

Email: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Date of Birth: _____ School: _____ Grade (Fall 2013): _____

Emergency Contact Name _____ Phone: _____

1. Please list any past volunteer experience:

2. Please list your skills and experience that can be utilized in your volunteer service with the library.

3. Why do you want to volunteer at the library?

4. Are you required to fulfill a specific number of volunteer hours? YES NO
If yes, how many? _____

5. Do you have a current Smith Public Library card? YES NO

6. Who referred you to the library?

7. Indicate any languages (other than English) you can speak or write.

Teen Volunteer Agreement:

THE SMITH PUBLIC LIBRARY AGREES TO:

- To provide our volunteers with a safe working environment.
- To provide guidance and training on a wide variety of library oriented tasks. We will answer any questions and provide helpful feedback.
- To recognize your value as a volunteer to the success of the library.

AS A TEEN VOLUNTEER, I AGREE:

- To follow all of Smith Public Library's policies and procedures.
- **To call the library as soon as possible if I am unable to report to my shift at the library.**
- To arrive on time.
- Provide the Library with an accurate record of my hours worked by signing in and out on my volunteer time sheet.
- **To dress appropriately. Casual clothes like shorts are fine, but nothing with holes or that is too revealing.**
- To leave headphones off and keep phone calls and texts to a minimum.
- To respect the Library's patrons by being friendly and to guide them to a staff member when necessary.
- To accept the Library's right to dismiss me for poor attendance.
- To carry out my given tasks while maintaining a professional attitude and seeking assistance if I have a question or have completed my task.
- To leave younger siblings at home and not invite friends to hang out at the library during your shift.

AS A PARENT, I AGREE:

- To encourage my teenager to strive for good work habits and attendance.
- To be responsible for all transportation and to ensure that my teenager arrives on time.
- To put emphasis on the importance of my teenager's volunteer responsibility.

I attest that all information provided is accurate and true to the best of my knowledge.

Volunteer Signature: _____ Date: _____

Parent Signature: _____ Date: _____