

**Plainville Public Library
High School Volunteer Program Application**

Date _____

Your Name _____

Mailing Address _____

Phone _____

Email Address _____

School Attending _____ Grade _____

Is this for required community service? No ___ Yes ___

This is for (circle one): school scouting college application personal enrichment other _____

If yes, how many hours do you need? _____ By what date? _____

Why are you interested in volunteering at the library?

Do you have any special skills or knowledge that would be of benefit to the library?

Availability: please write the hours you would be available each day, leave blank if you are not available

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____

Volunteers are scheduled based on availability and the needs of the library for a single 1 or 2 hour shift each week during regular library hours only.

Please provide a personal reference (not in your family, coaches or teachers are fine)

Name _____ Phone _____

Email _____

Emergency Contact Information:

Name of person to contact in case of emergency and Relationship to volunteer

Emergency Contact Phone Numbers (home, work, cell) _____

Expectations for Teen Volunteers Please read and sign

- You will follow the schedule assigned by the library. You must give at least 24 hours notice if you cannot be at the library during your scheduled shift. If you are unable to be at the library during your assigned shift due to an emergency, or if you are running late, you will contact the library and let them know what is going on.
- If you miss a total of three shifts without notifying the library you will be dismissed from your duties as a volunteer.
- You will sign in upon your arrival at the library, and you will sign out when leaving.
- You will dress in a professional manner.
- You will behave courteously to library staff and patrons, and will refrain from talking on your cell phone or socializing with your friends while volunteering.

I have read the expectations of teen volunteers, and understand that, as a volunteer, my behavior reflects upon the library.

Your signature here: _____

Name of Volunteer _____ (please print)

Parent/Guardian Permission:

Volunteers under the age of 18 must have the written consent of parent or legal guardian in order to volunteer at the Farmington Library. I give my child permission to volunteer at the Plainville Public Library.

I _____, do hereby indemnify and hold harmless the Plainville Public Library, its employees, volunteers, or agents from any liability for accidents, injuries or illness that may occur to my child from his or her participation in the Library Volunteer Program.

Signature of Parent or Guardian _____ Date _____

Printed Name _____
