

Russell Library
Teen Volunteer Application
(7th – 12th grades)
Winter 2018
Due Date: 5PM, JANUARY 28, 2019

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email _____ School / Grade _____

Phone: _____

Contact (in case of emergency) _____ Phone _____

Dietary Restrictions/ Allergies:

Interests and hobbies that may be applicable to library tasks:

Please share why you would like to volunteer at the library?

Is this for community service? Please circle: Yes No

If yes, how many hours? _____ By what date? ____/____/____

Please write in time(s) you are available:

Monday: _____ Tuesday: _____ Wednesday: _____

Thursday: _____ Friday: _____ Saturdays: _____

Approximately how long are you willing to volunteer?

Summer

School Year

_____ 3 months _____ 9 months _____ not sure, but less than a year

_____ 6 months _____ 1 year _____ not sure, but probably more than a year

Signature: _____ Date _____

*unless approved by Teen Librarian, it may not be possible to fulfill all community services hours at the library.