

Metropolis Public Library Teen / College Volunteer Application

Introduction:

- Students must fill out this form in order to register for any volunteer activities.
- Parent or guardian signature is required.
- An official record of your volunteer hours will be kept by library staff. You can view these records at any time within library hours. It is important to note, however, that your record may be discarded after inactivity of one year.

The Form:

Student Name: _____
Library Card Number: _____
Address: _____
Home/Cell Phone #: _____

Specific club or activity that requires volunteer hours (leave blank or write "none" if this does not apply to you):

Specific interests (Check each that applies to you, or none):

- ____ Activities with children (ideal for aspiring teachers)
____ Activities with other kids/teens
____ Activities for the elderly
____ Cultural activities for all ages (i.e. art shows, movie nights, etc.)
____ Working in the library (i.e. organizing books, helping librarians, etc.)
____ Other; Please write any additional ideas you have for volunteer activities: _____

The Signatures:

Volunteer:

I, the volunteer, agree to participate in library-related volunteer activities. I also agree that I will do so while maintaining respect for myself, other people, and the property of the library and the others' at all times. I am responsible for myself, my personal belongings, my safety, and my actions.

Signed: _____ Date: _____

Parent/Guardian:

I, the guardian of the aforementioned volunteer, do give this student permission to participate in any library activities. I take full responsibility for his or her actions and I hereby state that the library holds no liability for my child.

Signed: _____ Date: _____

Librarian:

I, as a staff member of Metropolis Public Library, do hereby give permission for the aforementioned volunteer to participate in library activities.

Signed: _____ Date: _____