



SUMMER TEEN VOLUNTEER APPLICATION

The teen volunteer program is for students 12-18. Please use a pen and print clearly. Fill out the application and waiver completely and have your parent or guardian sign the waiver, then submit the completed forms at your local library. The volunteer leader from your branch library will contact you.

Name: _____

Address: _____

Email: _____

Birthdate: _____

Cell Phone: _____ **Home Phone:** _____

Parent/Guardian name: _____

Contact Phone number: _____

Please list dates that you will be UNAVAILABLE between June 7-August 7, 2021:

Available: Mornings Afternoons Evenings

Mon. Tues. Wed. Thur. Fri. Sat.

Location: Central East Forest Franklin North South

Availability Notes:

Special Skills: (such as babysitting, extracurricular, other volunteer jobs, etc.)

Emergency Information:

In case of emergency, notify: _____ **Phone:** _____

Doctor's name: _____ **Phone:** _____

Library use only: **SOR:** _____ **IDC:** _____ **Horizon:** _____