Teen Volunteer Application

Volunteers must be at least 13 years of age by the start date of volunteering

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| --- | --- |
| 6a9940a7e2_gray-ai.jpg | Shelbyville-Bedford County Public Library Thank you for applying to be a Teen Volunteer! We consider our volunteers to be a major asset to helping the library run smoothly. Please fill out the following form and return to the Youth Services Librarian, Emilee’ Le Clear.  For any questions or concerns, please contact Emilee’ at:  (931) 684-7323 Ext.111 or by email:YouthServices@sbcplibrary.org. |

### Applicant Information

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Email |  |
| Date of Birth |  |
| School |  |
| Parent Phone(s) |  |
| Why would you like |  |
| to volunteer? Please |  |
| be specific: |  |

### References

*Please list two (2) adult references (other than a relative)*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Acknowledgement Information

*Parent signature required if applicant is under the age of 18*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Date

As the parent or legal guardian, I give my permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to volunteer at the Shelbyville-Bedford County Public Library.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s Signature Date

|  |  |  |
| --- | --- | --- |
| *We thank you for your interest in our community by volunteering!* |  | Shelbyville-Bedford County Public Library220 South Jefferson StShelbyville, TN 37160 |

### Tennessee Promise

*Please answer the following if you are applying for Tennessee Promise hours*

Hours Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deadline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individual/Institution Hours Will Be Reported To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Court Mandated Community Service

*Please answer the following if you are applying for court mandated community service hours*

Hours Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deadline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hours Will Be Reported To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*\*PLEASE FILL OUT YOUR AVAILABILITY ON THE ATTACHED CALENDAR\*\*\*\*\***

TEEN VOLUNTEER SERVICE AGREEMENT

Teen volunteers provide assistance with the Shelbyville-Bedford County Public Library’s Summer Reading Program and other events at the library. Teen Volunteers are positive examples for younger patrons and encourage library usage and a love of reading.

Before beginning their service, Teen Volunteers must sign this Teen Volunteer Service Agreement. As a Teen Volunteer at the Shelbyville-Bedford County Public Library, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to the following:

1. I will arrive on time, sign-in and notify a staff member I am here. If I am unable to do this I will call the library at (931) 684-7323, giving 24 hours notice when possible.
2. I will remain on task until my time slot has ended (except for restroom breaks) unless a staff member has asked me to do another task and I will notify a staff member when I am taking any sort of break or leaving for the day.
3. I will speak with the Youth Services Librarian if I need to make changes to the schedule.
4. I will perform my duties as assigned in a pleasant manner. If I have any questions about what I am to do, I will ask a staff member.
5. I will refer patrons to the staff members on duty when questions arise that are not directly related to my job.
6. I will be courteous and respectful to library patrons, staff and other volunteers at all times.
7. I will use the phone only with the permission of a staff member.
8. I will not bring food into the library during my volunteer shift.
9. I will wear a volunteer nametag when I am working.
10. I will wear appropriate attire to the library (no bathing suits, no bare mid-riffs, no short-shorts, no short skirts, no clothing with offensive or threatening messages).
11. I will keep socializing to a minimum. Visitors, relatives and friends are welcome to use the library but may not participate as volunteers.
12. I will not use electronic equipment while on duty, including text messaging, listening to music, playing on the computer or playing games unless given special permission.
13. I will keep my cell phone and other personal items in the main office and will not make or receive any calls that are not emergencies.
14. I understand that any use of drugs, alcohol, weapons, or any form of theft, violence, or bullying are a violation of SBCPL’s Patron Code of Conduct and are grounds for immediate termination and/or prosecution.
15. Violation of this agreement may result in termination and jeopardize any future opportunities to volunteer at the Shelbyville-Bedford County Public Library.

The library considers volunteer work to be as valuable, necessary, and as important as paid employees’ work. Because of this, you will be expected to meet the same standards as paid staff.

We truly appreciate the time and dedication our volunteers put in to helping the library run smoothly. We hope that you build skills that will assist your success in future endeavors.

Volunteer Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

