

Teen Volunteer Application 2007

Must be at least Junior High or older

Campbell County Public Library
2101 4-J Road
Gillette, WY 82718

This is an expression of interest in volunteering at the Public Library. I understand this inquiry will be reviewed and my qualifications will be considered for areas suitable for volunteers.
Please Print or Type

Name:	Date:
Address:	
City/State/Zip:	Phone:
Emergency contact:	Phone:
School:	Grade:

Give two personal references we could call and talk about your abilities (teachers, counselors, or other adults not related to you).

Name: _____ Position: _____ Phone: _____

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1. Have you ever volunteered before? Yes ___ No ___ If yes, where? _____
Activities/Duties?

2. Please list your skills and experience which may be useful in your volunteer service to the Library:

3. Why do you want to volunteer at the library?

4. Please list your interests, hobbies, clubs or activities:

5. Are you volunteering to fulfill a specific requirement (for example, school credit)? Yes ___ No ___
If yes, how many hours and when is the deadline to complete? _____

Please identify the days you can volunteer: (circle) Monday Tuesday Wednesday Thursday Friday Saturday

What times are you available: From _____ am/pm To _____ am/pm

Volunteer session ___ Summer (June -August) ___ Fall (September - December) ___ Spring (January - May)

TEEN VOLUNTEER SIGNATURE: _____ (I attest that all the information is accurate and true to the best of my knowledge)

Permission to use teen photo for public display/promoting library and the volunteer program. Yes ___ No ___

PARENT SIGNATURE: _____ (Required if teen is under age 18)

Questions please call Susan Knesel, Young Adult Services Manager at 687- 9229