

Baldwin Public Library

LEARN. CONNECT. DISCOVER.

TEEN VOLUNTEER APPLICATION: GRADES 9-12

NAME (PRINT): _____ AGE: _____

EMAIL: _____ GRADE: _____ SCHOOL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

I want to volunteer because...

- I need _____ volunteer hours as a school requirement to be completed by _____ (date)
- I have to do community service for the court. I need _____ hours completed by _____ (date)
- Other: _____

WHY DO YOU THINK THE LIBRARY IS IMPORTANT TO THE COMMUNITY? _____

HAVE YOU EVER HAD A JOB OR VOLUNTEERED AT ANOTHER ORGANIZATION? PLEASE DESCRIBE.

ARE YOU FAMILIAR WITH HOW MATERIALS ARE ARRANGED AT THE LIBRARY? PLEASE EXPLAIN.

DESCRIBE YOURSELF IN 3 WORDS: _____

PLEASE TURN OVER



Possible assignments—(check as many interest you)

- Friends of the Library Book Sale Assistance (May and November)
- Shelving/Searching Library Materials
- Indoor or Outdoor Cleaning
- Event assistance—assist librarians with special programs and events, including setup and clean up
- Other (please elaborate): _____

In the boxes below, please check the time slot you would be able to volunteer.

Day Library Hours	SUNDAY 12:00-5:00	MONDAY 9:30-9:00	TUESDAY 9:30-9:00	WEDNESDAY 9:30-9:00	THURSDAY 9:30-9:00	FRIDAY 9:30-5:30	SATURDAY 9:30-5:30
Morning							
Afternoon							
Evening							

HOW SOON CAN YOU START? _____

The Teen Librarian will contact you as soon as possible.

Please return all applications to the Adult Reference Desk when completed or e-mail to adult.reference@baldwinlib.org.

Volunteer positions are available, as projects arise. Placement is not immediate, and hours are dependent on project and volunteer availability. Applications remain on file for six months.

Thank you for thinking of the Baldwin Public Library to donate your time!

APPLICANT'S SIGNATURE: _____

TODAY'S DATE: _____