

Pleasant Valley Library

Application Form for TEEN Summer Library Volunteers (14- 18 yrs.)

Name _____

Age _____ School/Grade _____

E-mail Address _____

Address _____

Phone #(Home) _____ (Cell) _____

Parent's Name _____

Emergency contact (if different from parent):

Name _____ Relationship _____

Phone # _____

Days/Times you are available: (Mark as many as you wish.)

Monday (10am- 8:30pm) morning afternoon

Tuesday (10am- 8:30pm) morning afternoon

Wednesday (10am- 8:30pm) morning afternoon

Thursday (10am- 8:30pm) morning afternoon

Friday (1- 6pm) afternoon **Saturday** (10am- 4pm) morning afternoon

I am good at:

Computers

Arts and Crafts/Creative Work

Alphabetical Order

Working with/Helping Children

Working Alone

Organizing/Shelving

Other _____

Parents: Please read and sign below:

I give permission for my son/daughter to volunteer at the Pleasant Valley Library. I understand that my child should be dropped off on time; picked up when his/her volunteer time is over; and that he/she will be expected to dress appropriately for work in a public place.

Parent's signature

Date