

Date: _____



Scotch Plains Public Library Teen Volunteer Application

Please fill out completely and neatly. If we cannot read your application, we may not be able to reach you. When completed, please return to the Youth Services Department.

Name: _____
(First) *(Last)*

Address: _____

Town: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____

Library Card Number: _____
(Must be a Scotch Plains or Fanwood Cardholder)

Best Contact Time: ___ Morning ___ Afternoon ___ Evening ___ Anytime

School: _____ Grade: _____

Emergency Contact (Name/Phone/E-mail Address/Relationship to you):

Preferred days for volunteering (Please circle your choices)
Monday Tuesday Weds. Thursday Friday Saturday Sunday

Preferred times for volunteering (Please circle your choices)
Morning Afternoon Evening Other: _____

Teen Volunteer Agreement

What you can expect from us:

- We will work with you to resolve problems with scheduling or assigned tasks.
- We will assist with any difficulties with library users.
- We will provide, upon request, documentation of your community service hours and/or letters of recommendation based on your timesheet.

What we expect from you:

Volunteering is very similar to having a job – you must be on time, courteous, and enthusiastic. We ask that you try your best to follow our volunteer guidelines and give your best effort when completing a task.

As a teen volunteer for SPPL, I agree to the following guidelines:

- I will arrive at the Library at my assigned time and notify the Youth Services Department staff that I am here
- I will keep track of my schedule
- If I cannot make my scheduled shift, I will call the library and tell a staff member or e-mail Youth Services Department. If possible, I will notify the library at least one day in advance or as soon as possible.
- I understand that I may not be able to reschedule a missed shift.
- I will make sure my ride home arrives before the library closes.
- I will wear a volunteer nametag while I am working.
- I will focus on my volunteer assignment and keep socializing to a minimum.
- I will perform my assigned duties in a pleasant manner, and be courteous and respectful to all library users, employees and other volunteers at all times.
- I agree to keep confidential any personal information I may encounter regarding library users, employees or other volunteers.
- I will refer library users to the staff when asked a question not directly related to my duties.
- I will not bring food or drinks into the library, with the exception of water bottles with caps.
- I will keep my cell phone on vibrate and will not make or receive calls or texts that are not emergencies. If I must text or call, I will notify the library staff.
- I will wear appropriate attire to the library. No: bare feet, bathing suits, exposed midriffs, revealing or distracting attire, etc. A library staff member may cancel my volunteer shift for the day if I fail to follow this guideline.
- I will maintain a positive attitude and set a good example.
- At the discretion of the library staff, I may be asked to stop volunteering if I fail to follow these guidelines or if I have repeated call-outs or no-shows.

Thank you for taking the time to fill out this application. We are pleased that you are interested in volunteering with us. When you sign below, you are stating that the information you have provided is true, and you understand and accept our guidelines for volunteering. Your supervisor will explain your specific assignments in detail on your first day.

Volunteer Signature: _____ **Date:** _____

Legal Guardian's Signature: _____ **Date:** _____

For Staff Only

Date Received: _____

Staff Initials: _____

Updated 12/10/19