

Belleville Public Library

Teen Volunteer Application

Do you have special skills or talents you would like to share with the library? Do you need service hours? Do you want to give to your community and have fun too? Volunteer at the Belleville Public Library!

Teen volunteers must be ages 12-18 years and currently enrolled in 7-12th grade. Volunteers must enjoy working with children and be committed to offering quality service to the community. The Teen Advisory Board (TAB) will meet on the first Wednesday of the month (October-May) and weekly during the Summer Library Program. Volunteers are required to attend at least quarterly (four times per year). If you are not able to make this commitment, we rather you contact us at a later date when you are better able to do so.

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone # (teen's) _____ text message reminders? Y N

Parent/Guardian Name: _____ Phone # _____

Most communication with volunteers will be via email. Please list an email that is checked on a regular basis. Email: _____

Current grade/year: _____

Emergency Contact(name): _____ Relationship _____

Phone# _____

What are your hobbies and special interests?

Why do you want to volunteer at the library?

Volunteer Opportunities

- 1.) Monthly TAB meetings first Wednesday of the month 4:30-5:30pm. (October-May)
- 2.) Summer Library Program TAB meetings (weekly) times TBA
- 3.) Special projects including: Book sale, Lakefest, Music in the Park, UFO Days, Teen book reviews/trailers, and Summer Library Programs.

Work Agreement

I have read and understand the requirements for teen volunteers at the Belleville Public Library. I will give advance notice if I will be late or absent for any reason for scheduled volunteer times and I will attend at least four TAB meetings per year.

Full name _____

Signature of volunteer: _____ Date: _____

I understand my daughter/son is volunteering and I agree and support this commitment to the library.

Name of parent/guardian _____

Signature of parent/guardian _____ Date: _____

Please sign and return to the Belleville Public Library.