

Goodnow Teen Volunteer Spring Application



Personal Information

Name: _____

Address: _____

Email: _____ Phone: _____

****Most communication will be done via email. Please check your email regularly.****

Birth Date: _____ (you must be at least 13 years old to volunteer) Grade: _____

School: _____

Additional Information

| | |
|----------------------------------------------------------|--|
| Describe any previous volunteer experience you have had: | |
| Describe any paid work experience you have had: | |
| Please list any experience you've had with children: | |
| What extra-curricular activities do you enjoy? | |
| What else will you be doing this spring? | |
| Why do you want to volunteer at the library? | |

Availability during the School Year:

Please indicate the hours that you are available during these times; example: 2-4 pm in afternoon slot on Monday

| | Morning | Afternoon | Evening |
|-----------|---------|-----------|---------|
| Monday | | | |
| Tuesday | | | |
| Wednesday | | | |
| Thursday | | | |
| Friday | | | |
| Saturday | | | |

Interviews and Training

All **new** volunteers will be interviewed prior to being accepted as a member of the Goodnow Teen Volunteer Team. We will contact you via email to set up an interview time.

Please indicate if you are a new or returning volunteer: New _____ Returning _____

Training is **MANDATORY** for all **new** volunteers helping in the Children's Room. Please indicate your availability over the first few weeks of school so that we can schedule a training time.

Emergency Contact and Signature

Person to contact in case of an emergency:

Contact Name: _____ Relationship: _____

Phone #: _____ Alternate Phone #: _____

Your Signature: _____ Date: __ / __ / ____

Parent/Guardian Signature: _____ Date: __ / __ / ____