

Youth Volunteer Interest Form

Name: _____ Age: _____

Address: _____

Phone Number: _____

Email Address: _____

Emergency Contact Info: _____
Name/Relationship to Volunteer Phone Number

What library did you turn your application into? _____

What school do you attend? _____ What grade are you in? _____

Are you volunteering for community service hours? Yes No If so, how many hours do you need? _____

As a library youth volunteer, I agree:

- 1. To follow staff directions.
- 2. To arrive on time and check in with staff upon my arrival.
- 3. To call my supervisor as soon as possible if I am unable to volunteer during my regular schedule.

The Library agrees:

- 1. To provide you with a safe work environment.
- 2. To provide supervision and training by a member of the Library staff.
- 3. To address your requests and concerns.

As a parent, I agree:

- 1. To encourage my child to strive for good work habits and attendance.
- 2. To make sure my child arrives on time and has transportation home.
- 3. To emphasize the importance of my child's volunteer responsibility.

I (print child's name) _____ agree to keep the volunteer schedule the library and I agree upon. I will follow all rules of the library. If I do not keep to this agreement, I realize I may be asked to leave the Library's youth volunteer program.

I give my child permission to be a youth volunteer for the San Francisco Public Library.

Parental/Guardian Signature

Date

***Staff Use:** Were you able to place this volunteer at your library? Yes No

If yes, name of staff person supervising this volunteer. _____
