Staff Use Only: Date Info Entered:



Fontana Regional Library Teen Volunteer Application

	reen volunteer A	ppiication	
Volunteers will work during the time commitments will be arrange Volunteers who cannot meet as	ged by each volunteer and the	staff person who is re	sponsible for their work.
Please list days & times	s available within the	given time slots.	
	<u>Available Ti</u>	<u>mes</u>	
to	Monday	to	Thursday
to	Tuesday	to	Friday
to	Wednesday	to	Saturday
	Interest Ar	eas	

eens may check as many areas as they like. The type of work selected by teen olunteers may not be available, as it is dependent upon what is happening during their olunteer time.
Children's Area (shelving, dusting, cleaning books/discs, wiping keyboards, straightening, organizing, other jobs as needed, etc.) Craft Prep Children's Programs (room set-up/break-down, cleaning, assisting children and program leader) Teen Program Assistant (room set-up/break-down, cleaning, assisting program leader) Movie Attendant (room set-up/break-down, cleaning, movie monitor) Special Events (holiday parties, parade float, video projects, fundraising, community events, etc.) Blog Writer (book reviews and other types of writing for the teen blog.) General (shelving, special projects, book repair, self check-out machine and online catalog assistance, other jobs as needed, etc. Teens may use the blank area below to list any special skills they possess and/or hobbies, school lubs or other organizations they belong to.

Contact Information



Name (printed)
Street Address
City, ST, Zip
Age, Grade and School
Best Number to Reach Teen
Parent/Guardian's Name (printed)
Best Number to Reach Parent/Guardian
Teen's E-mail
Parent/Guardian's E-mail
Must supply a valid form of contact. In most libraries, e-mail is the primary form of communication the volunteer coordinator uses to send teens and their families information.
Teen Volunteer Agreement and Signature
I have read the information in this packet and agree to follow the Teen Volunteer Guidelines.
Name (printed)
Signature Date
Parent/Guardian Agreement and Signature
I have read the information in this packet and give permission for my teen to be a Teen Volunteer. If my teen chooses to write for the teen blog, I give permission for their work to be posted on the internet.
Name (printed)
Signature Date
Please list any limitations your child has that may affect their participation in teen volunteering.
Teens are encouraged to attend the Teen Advisory Group (TAG) where available.