

**CHERRY HILL PUBLIC LIBRARY**

**TEEN VOLUNTEER APPLICATION**

Teen volunteers must be between 12 yrs. to 18 yrs.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_**

**E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_**

**School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_**

**1. Availability:**

 a. Days you can volunteer: (circle) Sun Mon Tues Wed Thurs Fri Sat

 b. Times you can volunteer: From \_\_\_\_\_\_\_\_\_ am/pm to \_\_\_\_\_\_\_\_am/pm

 **2. Are you required to fulfill a specific number of volunteer hours? \_\_\_\_\_\_\_If yes, how many?\_\_\_\_\_**

**3. Must you have your hours completed by a certain date?\_\_\_\_\_ If yes, when?\_\_\_\_\_\_\_\_\_**

**4. What areas of volunteering interest you?**

🞏 Book Reviews

🞏 In-house Cleaning Assistance

🞏 Make & Take Crafts

🞏 Book Sale

🞏 New Group

🞏 Teen Advisory Board (T.A.B)

*Contact Youth Services for summer-only Volunteering in early May to volunteer for Summer Reading.*

**5. Other places you volunteer:**

🞏 Environmental Groups

🞏 Faith Based Organization

🞏 Boy/Girl Scouts

🞏 School-based

🞏 United Way

🞏 Youth Organizations

🞏 Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **6. Where did you learn about volunteer opportunities at the library?**

🞏 School

🞏 Library staff

🞏 Library flyer

🞏 Facebook

🞏 Library website

🞏 Friend

 🞏 Community Organization

 🞏 Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. References- 2 non-household references are required**

 a. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 b. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Teen Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_

**Parent Permission Required for Volunteers under 18.**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(responsible party), responsible for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(child’s name) do hereby release Cherry Hill Public Library and Cherry Hill Township, and their employees from any and all liability which may arise as a result of volunteering at the Cherry Hill Public Library. He/she has my full permission to participate in the library’s volunteer program and I waive any claim for damages to his/her property and assume all the risks of such participation. The Cherry Hill Public Library also has permission to use my child’s photograph, videotaped image or creative works in publicity about the Library and its activities or displays. \_\_\_Yes \_\_\_No

**Parent/Guardian signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email:** ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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