



# Application Youth Volunteer

## ABOUT YOU INFO SHEET

The Hennessey Public Library provides a variety of volunteer opportunities for youth (ages 9 and older). We will keep a log of the hours each tween/teen works and provide letters to promote the academic and professional endeavors of HPL volunteers upon request. Youth will have an opportunity to develop new skills and perform a vital service to the community.

### ABOUT YOU:

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

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

\_\_\_\_\_

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

Preferred method of contact:

Call                      Text

Age: \_\_\_\_\_

T-shirt size: S M L XL 2X 3X 4X

### COMMITMENT TO WORK:

#### SPECIAL EVENTS

- Storytimes
- Game Nights
- Pumpkin Patch
- Classes
- Movie Nights
- FOL Fundraisers

#### WEEKLY SHIFTS (list times)

- Mondays \_\_\_\_\_
- Tuesdays \_\_\_\_\_
- Wednesdays \_\_\_\_\_
- Thursdays \_\_\_\_\_
- Fridays \_\_\_\_\_

### YOUTH SIGNATURE:

My signature indicates that the information provided in this Volunteer Application is true and accurate.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### STATEMENT OF INTENT:

In your own words, tell us why you want to volunteer.

What do you hope to learn?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What should we know about you (favorite things, aspirations, etc.)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School: \_\_\_\_\_

Clubs/Organizations you might need volunteers hours for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EMERGENCY CONTACT INFO:

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

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

\_\_\_\_\_

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

Relationship: \_\_\_\_\_

Any allergies or medical conditions we should be aware of:

\_\_\_\_\_  
\_\_\_\_\_



# Youth Volunteer Application

## EXPECTATIONS

### YOUTH RESPONSIBILITIES:

- Provide excellent customer service to staff and patrons.
- Establish a schedule with staff.
- Communicate absences with staff in advance. (Missing 2 scheduled shifts without contacting staff means you will be dropped from the volunteer program.)
- Put away cell phone during shift.
- Dress appropriately. (This means no T-shirts with graphics or wording except to promote Hennessey/HPL, no torn clothes, no flips flops, no short shorts.)
- Protect the privacy of library customers. (Disclosure of customer information without permission of the Library Director is cause for removal from the volunteer program and may lead to possible legal action.)

I understand the expectations listed above, and that failure to meet the listed expectations may lead to dismissal from the HPL Youth Volunteer Program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### CODE OF CONDUCT:

I have read the Hennessey Public Library's Patron Code of Conduct Policy, understand it, and agree to adhere to it. I acknowledge that if I fail to meet the code of conduct, it may lead to dismissal from the HPL Youth Volunteer Program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## FOR OFFICE USE ONLY

This youth's supervisor is:

- Library Director  
 Circulation Librarian  
 Children's Librarian

This youth's schedule is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This youth was disciplined:

Date \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This youth was disciplined:

Date \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This youth was dismissed from the volunteer program:

Date \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# Youth Volunteer Application

## LIABILITY WAIVER

Thank you for your interest in the Hennessey Public Library Volunteer Program. We greatly appreciate your assistance and commitment to our library. This is a form where you agree to release the Town of Hennessey of all liability while working with the Hennessey Public Library.

**Instructions:** The parent or legal guardian shall complete this form. The completed form must be returned as part of the Hennessey Public Library Youth Volunteer Application packet.

\_\_\_\_\_ (the "Volunteer") desires to serve the Hennessey Public Library and actively engage in the duties, responsibilities and expectations of a volunteer. As the parent or legal guardian of the volunteer, I hereby offer the volunteer my permission to participate in the Hennessey Public Library ("HPL") Youth Volunteer Program without me or any other accompanying adult. I understand that library staff will be coordinating the volunteer activities and will not be responsible for the volunteer before, during or after the volunteer's service hours.

**Release and Waiver:** In exchange for the volunteer being allowed to participate in the HPL Youth Volunteer Program, I agree to waive, release and forever discharge any and all claims, rights and causes of action against the Town of Hennessey and their respective officers, officials, employees, and agents for injury or damage caused or alleged to be caused as a result of the volunteer's participation in the HPL Youth Volunteer Program.

**Service Time:** I understand that the volunteer will not be compensated financially, or in any other manner for their community service. A letter will be provided reporting the hours of service as requested by the volunteer.

**Assumption of Risk:** Further, I understand and voluntarily assume all risks associated with the volunteer's participation in the HPL Youth Volunteer Program, including the possibility of accidental or other physical injury during the HPL Volunteer Program conducted by the Town of Hennessey, Hennessey Public Library, including programs co-sponsored by other agencies. This waiver and release of all claims and assumption of risk is intended to be as broad and inclusive as permitted by the laws of the State of Oklahoma. If any portion of this document is held invalid, the remainder shall continue in full force and effect.

My signature certifies that I grant permission for the volunteer to participate in the HPL Youth Volunteer Program and further, will assure that, if dropped off at the library, the volunteer will know the arrangements for getting home in a safe and timely way.

**Promotional Release:** My signature certifies that I grant the Town of Hennessey the right to record the volunteer, the right to use information provided during an interview and the right to use said photographs and information in connection with the publicizing or promoting of the Town of Hennessey, its services or departments and agencies, print or online.

Check to OPT OUT of having the volunteer recorded for promotional purposes.

I have carefully read and fully understand the meaning of this document. The information is true and accurate to the best of my knowledge. I agree to all the terms set forth herein, and I have voluntarily signed below.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_