## **Shenandoah County Library System Young Adult Volunteer Application**

Please complete this application so that we can discover more about you and your interests in volunteering with us.

Name						
Address						
Telephone						
<b>Emergency Contact:</b>	Name: Telephone:					
How did you	hear about ou	ır volunteer pro	ogram?			
What is your availability: □ Weekly □ Summer only						
□ Periodically	y (on-call)	□ School year on	star7	T DATE:		
Please indica	te the times of	f day you will b	e available to v	olunteer:		
Mon	Tues	Wed	Thurs	Fri	Sat	
What would	you like to do	while volunteer	ring with us?			
☐ Shelf reading ☐ Assist with Children's Programs ☐ Assist with Special Events						
□ Shelving □ Assist with Summer Reading						
□ Other (please	e list):					
What School do you attend? Grade?						
Signature:			Date	e:		
Please print	your name:					
****	****	******	*****	****	*****	
		/legal guardian				
Dateas a voluntee	r in the Shena	ndoah County	(name) Library.	has my permis	ssion to work	
Signature			Relation	nship		

## **Young Adult Volunteer Guidelines**

- Young adult volunteers must be between 13 and 17 years old to work at the Shenandoah County Library.
- A parent or legal guardian must sign the application, giving permission for the youth to volunteer here.
- Youth volunteers are responsible for arranging their own transportation to and from the Library.
- Library etiquette is to be followed. This includes:
  - No running, shouting, or other distractions while on library property.
  - o Friends should not join you or call you on the phone while you are working, except in case of emergency.
  - o Appropriate dress is required.
  - o No food or drink in the main area of the Library.
  - o Cell phones are turned off.
- Please call the Library at 540-984-8200 if you are unable to come in on a designated day.
- Sign in at the Volunteer Desk and pick up your name tag.
- Work assignments will be available for you each day you volunteer. Please ask, if you need more direction to complete your tasks.
- Please let the staff know when you have finished your time and are leaving.

We are happy you have decided to volunteer at the library and hope this will be an enjoyable experience for you. Please sign below, indicating you agree to these guidelines. A copy of this agreement will be given to you for future reference.

I have read and understar	nd the Youth Volunteer Guidelines:
 Signature	Date
Print name	-