

BLOOMINGDALE

PUBLIC LIBRARY



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KEEP THIS TOP SHEET.

VolunTeens

Thank you for your interest in our VolunTeen program. The work of our volunteers is valuable to us as well as to the community. BPL VolunTeens help keep the Youth Services Department neat and organized, prepare program materials, aid in supervising children's programs, and assist with other needed tasks. As a volunteer, you will be subject to the guidelines listed below. Please review these responsibilities and guidelines and make sure that you are willing to comply with them all.

The VolunTeen program is open to students in grades 7 - 12. VolunTeens commit to helping the library once a week for the 8-week summer session beginning **June 1** and ending **July 29**. VolunTeens are additionally asked to help with two children's programs during the summer. Volunteer hours are scheduled around teens' availability. VolunTeens can expect to work 10 to 15 volunteer hours during the summer program.

Registration begins April 1. Forms must be received by May 20th. Late forms may not be considered.

All applications will be reviewed and applicants will be notified of their status by June 1st.

ALL Volunteers MUST attend a mandatory informational meeting on one of the following dates/times.

Monday, May 22, 6:00-7:00 p.m. Wednesday, May 24, 4:00-5:00 p.m.

Tuesday, May 30 4:00-5:00 p.m.

Advantages of the VolunTeen Program

- If you do your job properly, you are gaining valuable job experience.
- You have the opportunity to demonstrate good attendance, dependability, creativity, and interpersonal skills while you work with us.
- You are eligible to receive letters of recommendation for job references, Honor Society, as well as school and community awards. You may fulfill service hours for school, honor society and organizations.
- Your work serves people of all ages and is a valuable contribution to the community.
- Special events, perks, and treats for VolunTeens ONLY.
- It is rewarding and FUN!

Responsibilities

- Keep to your schedule and please be on time.
- Check in when you arrive and wear your badge.
- Complete tasks quickly and cheerfully.
- Dress appropriately.
- Keep your timesheet accurate.
- Do **NOT** bring friends, siblings, or children you are babysitting with you during your shift.
- Respect all rules regarding behavior.
- Remember YOU represent the library.

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2017 Summer VolunTeen Application

Name: _____ Age: _____

Address: _____ City: _____

Phone Number: _____ This is: Home ___ Cell ___ Email: _____

School: _____ Grade in the Fall: _____

Parent's Name(s): _____

What is the best method for contacting you? _____

Why do you want to be a VolunTeen? _____

How many volunteer hours are you looking for? _____

Have you ever volunteered in another location? (If yes, where?) _____

By signing this application, you state that you have received and read a copy of the VolunTeen Guidelines and agree to abide by the rules as set forth within, as well as those set out in the mandatory orientation meeting. Please remember that the staff relies on VolunTeens to assist with many programs and activities. It is extremely important for all VolunTeens to be on time and prepared for their assigned shift. Please also note that all assignments are important and should be completed in a professional manner. VolunTeens who do not show up for their assigned shift without attempting to find a replacement for that shift, and without giving **advance** notice to the VolunTeen coordinator will be released from the VolunTeen program after two occurrences.

VolunTEEN Signature and Date

Parent Signature and Date

****This application must be signed and returned to the Youth Services Department before any volunteer hours will be assigned.****

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VolunTeen Emergency Information

Name: _____ Date: _____

Address: _____

Home Phone Number: _____

In case of emergency, contact:

Name	Phone Number	Address	Relationship to teen
Name	Phone Number	Address	Relationship to teen
Name	Phone Number	Address	Relationship to teen
Doctor Name	Phone Number	Address	
Preferred Hospital			

Emergency Medical Information (allergies, medication, etc.)

_____ Taking: ___ Allergic to: ___

_____ Taking: ___ Allergic to: ___

_____ Taking: ___ Allergic to: ___

_____ Taking: ___ Allergic to: ___

_____ Taking: ___ Allergic to: ___

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VolunTEEN Questionnaire 2017 Summer

Name: _____ Age: _____
Birthday: _____ Favorite color: _____

What is your favorite holiday? Why? _____

What was the last thing you read for fun? _____

What's your favorite artist/group/type of music? _____

Current favorite song? _____

Best movie—new or old— you saw this year? _____

How did you hear about the VolunTEEN program?

What strengths do you bring to the library's volunteer program?

What are some areas of personal growth you'd like to work on?

What are three words that describe you? _____

What other activities are you involved in?

If you've been a VolunTeen before, what can we do to make the VolunTEEN program even better? Things to add...things to eliminate....?

What kinds of projects interest you? (Circle all that apply)

Preparing art and craft supplies and projects

Creating cards for elderly patrons

Maintaining the environment of the library

Technology

Assisting with programs

Working with library materials/organization

Working with children

Other: _____

Are you available to work at the Ice Cream Social on Thursday, August 3rd from 5:00—9:00 pm?

Yes _____ No _____

Please circle the training session that you will attend.

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Tuesday, May 30 4:00-5:00 p.m.

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Please indicate the days and times you are available to work:

Grey shaded areas are times the library is not open for volunteering. Do NOT select any of these.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9:00-10:00						
10:00-11:00						
11:00-12:00						
12:00-1:00						
1:00-2:00						
2:00-3:00						
3:00-4:00						
4:00-5:00						
5:00-6:00						
6:00-7:00						
7:00-8:00						

Please list any known vacation dates, school holidays, etc. on which you will NOT be available for work:
