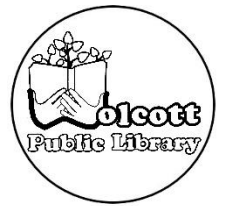


Junior Volunteer Application

For volunteers in grades 6-12



Name: _____ Age : _____

Address: _____

Phone #: _____ Email: _____

Why do you want to volunteer at the Wolcott Public Library? If you need to complete volunteer hours for school, scouts, honor society, etc., please include that.

How many volunteer hours do you need to complete? _____

What type of volunteering are you interested in doing?

Book Buddies (reading to younger children) Summer Reading Volunteer Program

Teen Library Council Friends of the Library book sale Other

Hours Available (Write in):

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>

I agree to work responsibly and conscientiously while performing my volunteer duties and to behave respectably in the library. I will contact the library with any schedule changes.

Volunteer Signature: _____ Date: _____

For Parents/Guardians:

I give my child permission to volunteer at the Wolcott Public Library.

Parent Signature: _____ Date: _____