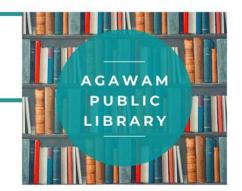
## AGAWAM PUBLIC LIBRARY

Nancy D. Siegel, Library Director Jolene Mercadante, Assistant Director

**APPLICANT (TEEN) INFORMATION:** 



## TEEN LIBRARY VOLUNTEER APPLICATION

Teen Volunteers do tasks assigned by Youth Services Library Staff. They may include organizational tasks, art/craft support tasks, and preparation for library programs. Sometimes Teen Volunteers help out during library programs, but they are not required to.

| Last Name:                | First Name:                              | Age:                         |
|---------------------------|--|------------------------------|
| Optional questio          | n: what pronouns should we use for you?  |                              |
| Home Address:             |  |                              |
| Phone Number:             |  |                              |
| Personal Email (NOT you   | ır school email):*                       |                              |
| Would you rather be co    | ntacted by phone call or email?          |                              |
| *School emails filter out | messages from email addresses that are r | not within the school system |

750 COOPER ST

AGAWAM, MA 01001

(413) 789-1550

WWW.AGAWAMLIBRARY.ORG







| EMERGENCY CONTACT   | T INFORMAT                       | ΓΙΟN:   |               |              |                 |            |
|---|----------------------------------|---|---------------|--------------|-----------------|------------|
| Emergency Contact Fu  | ll Name:                         |   |               |              |                 |            |
| Emergency Contact Ph  | one Numbe                        | r:  |               |              |                 |            |
| Emergency Contact En  | nail:                            |   |               |              |                 |            |
| COMMUNITY SERVICE   | HOURS:                           |   |               |              |                 |            |
| Do you need communi   | ty service ho                    | ours?   |               |              |                 |            |
| How many hours are y  | ou hoping to                     | complete a  | t the library | ?            |                 |            |
| When is the deadline f  | or completing                    | ng your hour  | ·s?           | ·            |                 |            |
| AVAILABILITY: When are you available hours you are available  |                                  | er? For each  | day you hav   | ve some avai | lability, write | e down the |
| DAY:  | MON.                             | TUES.   | WEDS.         | THURS.       | FRI.            | SAT.*      |
| LIBRARY HOURS:  | 9AM-9PM                          | 9AM-9PM   | 9AM-9PM       | 9AM-9PM      | 9AM-5PM         | 9AM-5PM    |
| YOUR AVAILABILITY:  |                                  |   |               |              |                 |            |
| *Closed Saturdays during TEEN ADVISORY BOA  Are you interested in service hours by meet programs. Check one | RD: joining the ting for 1 house | <b>Teen Adviso</b><br>ur a month to<br>y in joining T | o share ideas | for the Teer | n Space and t   |            |
| APPLICANT SIGNATU   |                                  | _   |               |              | DATE:           |            |
| EMERGENCY CONTAC  | CT SIGNATUR                      | RE:   |               |              | DATE:           |            |