



C.H.
BOOTH
LIBRARY

Volunteer Application

C.H. Booth Library | 25 Main Street | Newtown, CT 06470

Please fill out this application and submit it to the library via email at ya@chboothlibrary.org or in person at the Circulation or Young Adult department service desks.

Today's Date: _____

Last Name: _____ First Name: _____

Address: _____

Phone Number: _____ Cell Number: _____

Email Address: _____

Emergency Contact: _____

Emergency Contact's Phone Number: _____

What is their relationship to you? _____

Your Age (if under 18): _____

Parent / Guardian Name: _____

Parent / Guardian's Phone Number: _____

If you are a student, which school and grade: _____

Do you have a specific number of hours that you need to complete?

- Yes. How many? _____ When do the hours need to be completed by? _____
- No.

Days I am available to volunteer (circle all that apply):

Mon Tues Wed Thurs Fri Sat Sun

I am available during the (circle all that apply):

Mornings Afternoons Evenings after 5 pm

I'd like to volunteer because (check all that apply):

- I need high school / church hours
- College resume building
- I need community service hours
- Personal interest
- Other: _____

Do you have any special skills or interests? Do you have any previous volunteer or work experience? Is there anything else you'd like to share about yourself?

What volunteer opportunities most interest you (check all that apply):

- Arts and crafts (i.e. making displays)
- Assisting with children / teen programs
- Maintaining the order of library shelves
- Office / clerical work
- Technical help / chbMAKERS' Corner
- Writing book reviews
- Yard work and cleaning
- Young Adult Council
- Other (please specify) _____

If your application is accepted, the library needs to be able to rely on you to show up on the days and times for which you sign up, abide by the volunteer guidelines provided to you, remain for the entirety of your volunteer shift, inform the staff of any problems that occur during your shift, and stay in the building while on duty. The library can't guarantee hours and reserves the right to dismiss volunteers who do not abide by the guidelines.

Applicant's Signature: _____

Parent / Guardian Portion

As a parent or guardian of a young volunteer (under the age of 18) at the C.H. Booth Library, I:

- Give my child permission to volunteer at the library
- Understand that my child must abide by the volunteer guidelines
- Realize that before my child arrives and after my child leaves the library, the library bears no responsibility for my child
- Understand that the library will make reasonable attempts to accommodate volunteers with special needs. Two weeks is the recommended time frame for a reasonable accommodation.

Parent / Guardian Signature: _____

Please do not fill out. For library use only.

Date Received: _____

Date Contacted: _____

Schedule: _____

First Day: _____

Last Day: _____

Total Hours: _____