



Start Date: _____
End Date: _____
Type: _____
Letters attached: <input type="checkbox"/>

Youth Volunteer Application

Please use a pen to fill out the volunteer application. Answer each section with all the required information. Incomplete applications will not be accepted.

Name: _____
Last First Middle

Home Address: _____
Street City State Zip

Telephone: _____ **Email** _____
Home Work Cellular

Notify in case of an emergency:

Name: _____ **Relationship** _____

Telephone: _____ **Email** _____
Home Work Cellular

Education:

Grade: _____

School: _____

Skills:

List special skills, training, interests or hobbies that would be useful to the library: _____

List any languages, other than English, which you speak and read fluently: _____

Areas of Interest:

- Book Buddies (Summer only)**
- Summer Reading Program (Summer only)**
- Homework Helpers**
- Library organization**
- Cleaning up puzzles, toys, and props**

List current or previous volunteer and work experiences with dates including the Aurora Public Library:

Is there anything that would prevent or prohibit you from performing the duties of the job that we described in the volunteer guidelines? Yes No If yes, please explain. _____
