



Teen Volunteer Application

For individuals 12-18 years old.

Please review the volunteer handbook prior to completing this application.

Contact Information

Name _____
 Address _____
 Phone _____
 Email _____ Grade _____
 Emergency Contact _____ Phone _____

Interests & Special Skills or Qualifications

Why are you interested in volunteering? _____

What skills do you have from education, employment, volunteer service, or other activities that will benefit GCLD?

Which are your preferred area of service (please mark all that apply)?

Teen Tech Navigator Program Support
 Generalist Facilities & Maintenance

Availability

Which GCLD branch is your preferred branch (please circle all that apply)?

Kremmling Hot Sulphur Springs Juniper (GL) Granby Fraser Valley

What is your preferred schedule (please circle all that apply)?

Monday Tuesday Wednesday Thursday Friday Saturday Sunday AM or PM

How long do you wish to volunteer (min. 2 hrs/week)? _____ or _____ special (short term) project

I can commit to a regular schedule Yes/No

References: Please identify 1 Professional (ex. teacher, employer, coach) & 1 Personnel (ex. family, mentor)

Name _____ Relationship _____
 Email _____ Phone _____

Name _____ Relationship _____
 Email _____ Phone _____

Signature:

Affadavit - Please read each statement carefully before signing.

I certify that all information I have provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteering and may result in my dismissal if discovered at a later date.

I authorize the investigation of any and all statements contained in this application and also authorize any person, school, employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a background check. I hereby consent to a background check as a condition of volunteering.

W.

Signature _____

Date _____

Parent Signature (if under 18) _____

Date _____

Thank you for expressing an interest in our libraries. We will let you know if our needs meet your interest.