

# South Milwaukee Public Library

## Student Volunteer Application Form

**Applicant** Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Phone Number** Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Personal Email: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Emergency Contact** Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**Volunteering** Are you volunteering to get hours for an organization?

NHS: \_\_\_\_\_ NJHS: \_\_\_\_\_ Volunteers: \_\_\_\_\_ Other: \_\_\_\_\_

Advisor: \_\_\_\_\_ Email: \_\_\_\_\_

Please describe any related work/volunteer experience you have:

\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical restrictions? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Please Explain: \_\_\_\_\_

### **Agreement**

I understand that when I volunteer at the South Milwaukee Public Library, my actions are a reflection on myself as well as my organization and school.

I understand that the South Milwaukee Public Library reserves the right to screen volunteers, to accept or reject any applications, and to place applicants in specific locations and positions based on the needs of the Library.

I understand that I will not be paid for my services as a volunteer and I am giving my time freely to the Library.

I understand that my volunteer service may end at any time for any reason with or without cause and with or without notice.

### **Volunteer Time Arrangements**

After submitting your application, please send an email to Shirley.Langebartels@mcfls.org OR phone 414-768-8195 to arrange a time with the Teen Librarian.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_