Hauppauge Public Library Teen Volunteer Application (Grades 6-12)

Please return application to: Hauppauge Public Library (Attention: Catherine Berntsen, Head of Teens' Curriculum)

1373 Veterans Memorial Highway, Suite 1, Hauppauge, NY 11788

PERSONAL II	NFORMATION				
Name				Grade	
Email					
Address				Apt. #	
City		State	Zip Code		
Telephone (Ho	ome)	Telep	bhone (Cell)		
In case of eme	ergency, notify:				
Telephone		Relatio	nship		
Please check	all the days and times y			Please list any exceptions to the list of days/times you've checked off, such as activities that are will get in the way on a limited basis. (For example: I'm not good for Tuesday nights unless there is a school vacation, etc.)	
·	-		-		
Tuesday	□ Morning (10am-12pm) □	Afternoon (12pm-5)	pm) 🗆 Evening (5pm-8pm)		
Wednesday	□ Morning (10am-12pm) □	Afternoon (12pm-5)	om) D Evening (5pm-8pm)		
Thursday	□ Morning (10am-12pm) □	Afternoon (12pm-5)	om) 🗆 Evening (5pm-8pm)		
Friday	□ Morning (10am-12pm) □	Afternoon (12pm-5)	pm) 🗆 Evening (5pm-8pm)		
Saturday	□ Morning (10am-12pm) □	Afternoon (12pm-5)	om) [*] Library not open Saturday nights		
Sunday	*Library not open Sunday mornings] Afternoon (1pm-5	pm) 🗆 Evening (5pm-8pm)		
Duration of the volunteer work? Short-term (one semester or less) Long-term (school year) Summer Only					
REASONS FO	OR VOLUNTEERING				
Do you need t	o complete community	service for scho	ol? □ Yes □ No (If ye	es, answer the questions below)	
Number of hours you need to complete Deadline Date					
Class or club a	are you completing thes	se hours for			
Teacher/Advisor's Name Name of school					
Do you need to	complete community serv	vice for another re	ason, other than a schoo	l-related requirement? □ Yes □ No	
lf yes, number	of hours you need to c	omplete	Deadline D	Date	
Organization y	ou are completing thes	e hours for			
Contact Name			Contact number		

PLEASE CONTINUE TO THE NEXT PAGE

REFERENCES

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Please provide us with one professional reference. (Teacher/Advisor/Coach/Supervisor)

Name:		
Telephone:	Email:	

TERMS AND CONDITIONS

I authorize the Hauppauge Public Library to make inquiries as to my experience and character, and to certify that all statements made on this application are true.

I understand that the Hauppauge Public Library is counting on my services. If I fail to appear for assigned work days without prior arrangement with my supervisor, or if my work or the volunteer arrangement is unsatisfactory in any way, I understand that my volunteer service may be terminated.

I understand that the number of hours I requested on this application are not guaranteed to be fulfilled with this application. Duties and tasks may not always be available or needed by the Library, or may be filled at the moment. It is a good idea to always have alternative plans to obtain necessary volunteer credit.

I agree that I will not disclose any information relating to library guests, library business operations, or library personnel gathered or heard officially or unofficially in the course of my volunteer service. I understand that such information is strictly confidential.

I understand that there is no monetary compensation for volunteer services at the Hauppauge Public Library.