



# Youth Services Volunteer Application

Lisle Library District (LLD)

777 Front Street, Lisle, IL 60532 - Phone: (630) 971-1675

Contact LLD Volunteer Coordinator, Mallory Caise: caisem@lislelibrary.org

|                   |                   |        |        |                       |              |  |
|-------------------|-------------------|--------|--------|-----------------------|--------------|--|
| Volunteer Name    | First             |        |        | Last                  |              |  |
| Phone Number      | Home:             | ( ) -  |        | Cell:                 | ( ) -        |  |
| Emergency Contact | First & Last Name |        |        | Relation to Volunteer | Phone Number |  |
| Age and Grade     | Age:              | Grade: | School |                       |              |  |
| Email             |                   |        |        |                       |              |  |

Why do you want to volunteer at the Library?

What type of volunteer responsibilities interest you? (Choose all that apply)

|   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> Putting Books in Order   | <input type="checkbox"/> Copying and Folding             | <input type="checkbox"/> Assist Staff              | <input type="checkbox"/> Disinfecting Library Materials |
| <input type="checkbox"/> Helping with YS Programs | <input type="checkbox"/> Creating Videos for the Library | <input type="checkbox"/> Finding books from a list | <input type="checkbox"/> Cleaning Shelves               |
| <input type="checkbox"/> Material Recommendations | <input type="checkbox"/> Creating Visual Displays        | <input type="checkbox"/> Summer Read Assistance    | <input type="checkbox"/> Teen Advisory Board/TAB*       |
| <input type="checkbox"/> Cutting Paper            | <input type="checkbox"/> Data Entry                      | <input type="checkbox"/> Coding                    |   |

\*TAB application required

Time Commitment

Do you have a required number of volunteer hours to complete for school/scouts? \_\_\_\_\_ If yes, when are they due? \_\_\_\_\_

How often do you want to volunteer?  Scheduled Weekly  Scheduled Monthly  Summer Only  School Year Only

Can we contact you for last minute volunteer needs? \_\_\_\_\_

How did you hear about the Library's volunteer opportunities?

What previous volunteer experience do you have?

What skills or interests do you have? (Check all that apply)

|                                   |   |   |                                 |
|-----------------------------------|---|---|---------------------------------|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Good with People | <input type="checkbox"/> Alphabetizing      | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Gaming   | <input type="checkbox"/> Science          | <input type="checkbox"/> Multiple Languages | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Art      | <input type="checkbox"/> Math             | <input type="checkbox"/> History            | <input type="checkbox"/> Other: |

For Office Use Only:

Entered into Computer: \_\_\_\_\_ Scanned: \_\_\_\_\_

## Guidelines for volunteers

### What you can expect from us:

- **A positive experience:** Youth Services appreciates volunteers in assisting the Library with specific tasks. We offer training and want you to feel comfortable while performing assigned tasks.
- **Supervision:** Supervisors oversee work, set schedules, track time and answer questions.
- **Support:** Assistance is available from the Volunteer Coordinator, or contact appropriate staff at the Youth Services desk.
- **Policy Review:** As part of your training, your supervisor will review *LLD Policy 415: Volunteers* with you.
- **Reference Letter:** The Volunteer Coordinator can provide a reference letter upon request, after the volunteer has completed their volunteers assignments. **One week notice is required for a letter to be issued.**

### What we expect from you:

- **Dependability:** Please arrive on time. Please contact the Volunteer Coordinator if you cannot volunteer as scheduled.
- **Professional Work Habits:** When you arrive, please sign-in and report to staff for work assignment(s). Complete tasks to the best of your ability. If you have questions, ask for help.
- **Compliance:** You must comply with all Library policies, procedures, and codes of conduct.
- **Dress Code:** Dress comfortably and appropriately. See your supervisor for details. Dress comfortably. Wear your volunteer badge when on Library premises.
- **Confidentiality:** Volunteers shall maintain the confidentiality of all LLD proprietary/privileged information while volunteering at the Library.
- **Computer/Equipment Usage:** Computer, internet, email, or phone use shall comply with supervisor directives/guidelines.
- **Ending Volunteer Duties:** If it becomes necessary to end volunteering at the Library, please notify your supervisor as soon as possible.

## Applicant Signature & Parental Consent

I certify that the information provided on this application is true to the best of my knowledge.

**Parent/Guardian:** By signing your name below, you are stating, as the applicant's parent or guardian, that you give your consent for the applicant to participate in the volunteer program in the Youth Services Department at The Lisle Library District.

Applicant (Please print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Parent/Guardian (Please print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_