



# SPL Teen Volunteer Agreement

Thank you for your interest in the SPL Teen Volunteer Program! In order to be part of the program, you and your parent/guardian must sign this agreement. You will be working with Rachel Heller, Youth Services Director. Once you have completed the form, stop by the library or email Rachel at [rachel@sheplibrary.org](mailto:rachel@sheplibrary.org) to be added to the schedule.

## Volunteer Requirements:

- You must be at least 13 years old.
- If you are volunteering to fulfill a volunteer hour requirement, you are responsible for submitting that program's paperwork.

## Tasks:

- Shelving books
- Preparing for elementary school programs such as STEM Club and Crafternoon
- Organizational tasks
- Creating take-home craft kits for kids

## Policies:

- **Attendance:** It is important to show up for your shift on time. If you plan to be absent, please contact Rachel Heller as soon as possible. Multiple uncommunicated absences or constant tardiness can result in removal from the program.
- **Behavior:** You are expected to treat patrons, librarians and library property with respect. You are required to work diligently throughout their shift. If a patron asks a question, you are expected to answer or help the patron find one of the librarians.
- **Electronics Use:** You may use your phone for music with earbuds or headphones when you are not interacting with patrons, but you must be focused on your tasks.
- **Confidentiality:** Any patron information, such as name, books checked out, web searches, or other identifying information is strictly confidential and may not be recorded or copied in any form.
- **Resignation:** You may choose to leave the program at any time. It is important to inform Rachel Heller as soon as possible once you make this decision.

Volunteer Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone #: \_\_\_\_\_

Best Contact Method: (If different from parent/guardian phone)

Volunteer Phone #: \_\_\_\_\_

Parent or Volunteer email: \_\_\_\_\_

Are you participating in this program to fulfill volunteer hour requirements for school or another program? (Circle one) YES NO

If YES, what is the name of the school/program?

\_\_\_\_\_

Volunteer Pledge:

**I understand and agree to abide by the Teen Volunteer Program Agreement. I understand that failure to adhere to the policies in this document will result in my removal from the Teen Volunteer Program.**

Volunteer Name (Printed): \_\_\_\_\_ Date: \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_

Parent/Guardian Pledge:

**I have read and understand the Teen Volunteer Agreement. I understand that my child's failure to adhere to the policies will result in their removal from the program.**

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

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