



Young Adult/Teen Volunteer Application



James Blackstone Memorial Library Youth Services Department

Name: _____

Address: _____

Phone: _____

Email: _____

Days/hours available: _____

School: _____ Grade: _____

What are your hobbies and interests?

Have you ever volunteered at the Blackstone or another library? If yes, where and what did you do?

Typical tasks are shelving books, preparing crafts, cleaning toys, and straightening up shelves. Are you able to do these tasks?

Do you need to complete a certain number of hours by a certain date?

Please provide us with an emergency contact name and number:

Name: _____ Phone: _____