



For Library Use Only  
 Admin Copy \_\_\_\_\_  
 Interview/Orientation \_\_\_\_\_  
 Reference Letter \_\_\_\_\_  
 CORI Check \_\_\_\_\_

## Thomas Crane Public Library Teen Volunteer Application

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Library Barcode Number (Optional): \_\_\_\_\_

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

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

Email Address: \_\_\_\_\_ Age: \_\_\_\_\_ Grade (*entering this fall*): \_\_\_\_\_

Emergency Contact (**Name & Number**): \_\_\_\_\_

Number of Hours Needed: \_\_\_\_\_ Need to Complete Hours by: \_\_\_\_\_

Days Available: Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_  
 Saturdays (North Quincy Only) \_\_\_\_\_  
*Month/Year*

Languages You Can Read: \_\_\_\_\_ Languages Spoken: \_\_\_\_\_

Why do you want to volunteer at the library? \_\_\_\_\_

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

Volunteer/Work Experience (where, for how long, and what did you do?): \_\_\_\_\_

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

We are required to conduct CORI (Criminal Offender Record Information) checks on all volunteers, regardless of age. Volunteers will be given a separate CORI form requiring date of birth and the last six digits of their social security number.

I understand the responsibilities, duties, and work schedule of this position, and have reviewed the Library's Volunteer Policy. I am offering my services as a volunteer. I am at least 14 years old.

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

\_\_\_\_\_

Staff Use Only: ML \_\_\_ AS \_\_\_ NQ \_\_\_ WOLL \_\_\_ Staff Initials: \_\_\_\_\_

### Thomas Crane Public Library Volunteer Code of Conduct

1. Arrive on time for your volunteer shift. Staff will be here and relying on you for Homework Help Tutoring and other assignments.
2. If you can't come for one of your volunteer shifts, please call your supervisor as soon as possible.
3. Dress appropriately: clean and neat. Follow school rules for clothing and you will be fine.
4. The library expects professional conduct at all times both on and off the clock.

Teen signature: \_\_\_\_\_

### Photography Release/General Photography Release

*I understand that the Thomas Crane Public Library (TCPL) is seeking photographs/videos for publications, website, and dissemination to the press to assist in informing the general public about the work of the library and to document images and stories related to the library, the City of Quincy, residents, and visitors.*

*I give the TCPL, its assigns, licensees, and legal representatives the irrevocable right to use my name, image, and voice in all forms and media in all manners, including composite representations, and advertising and other lawful purposes, and I waive the right to inspect or approve the finished product, including written copy, that may be created in connection therewith.*

*In giving this permission, without fee or limitation whatsoever, and in consideration of the opportunity to participate in the publications, website or dissemination of press material, I agree to release, discharge, and hold harmless the TCPL and its employees, from any and all claims, actions, and demands of whatsoever nature, including but not limited to any claims of libel, or invasion of privacy, arising out of or in connection with the use of my photograph/video.*

### Parental Permission

If you are under 18, please have a parent/legal guardian sign the following permission form:

I (print) \_\_\_\_\_, parent/legal guardian, grant permission for

(print) \_\_\_\_\_ to volunteer at the Thomas Crane Public Library.

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_