

# Nevins Library Teen Volunteer Questionnaire

**NOTE: If you are completing court-ordered community service hours, please do NOT use this form and contact Mrs. Beverly Winn at 978-686-4080 x31 or [bwinn@nevinslibrary.org](mailto:bwinn@nevinslibrary.org).**

The Nevins Library is a busy place, and we are looking for volunteers to help us out. Teens ages 13-18 are invited to apply to our volunteer program. Our program is flexible, with volunteers being able to work **a minimum of 30 minutes to a maximum of 2 hours a day**. We are happy to help you accomplish your volunteering goals by creating a schedule that works for everyone. If accepted, volunteers will be required to attend a brief orientation, to familiarize themselves with the tasks they will perform.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_

Age: \_\_\_\_\_

I am available (circle all that apply): **M Tu W Th Fr Sat**

I am available (circle all that apply) **Mornings Afternoons Evenings**

Do you have any physical limitations? If so, please describe so we can best find jobs to suit your needs.

Do you have transportation to and from the library?

Are you looking to fulfill a service obligation? If yes, please provide details.

In case of an emergency, please contact:

Name \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to you \_\_\_\_\_

I understand that as a volunteer, I am expected to carry adequate liability insurance. Nevins Memorial Library is not responsible for any injury sustained as a volunteer.

According to the Methuen Town Ordinance, all volunteers are subject to a criminal background check.

Volunteers must be contributing to the good of the Library and will be evaluated on an on-going basis.

I understand and agree with the above statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature for person under 16 years of age:

\_\_\_\_\_