Batavia Public Library
Junior Volunteers
Students - Grades 6-8
FALL, 2017 - SPRING 2018

Are you a student in grade 6–8? Interested in becoming a Batavia Library Junior Volunteer? Here is some information you will want to know.

1. What junior volunteers might be asked to do:
   - Straighten shelves
   - Organize magazines
   - Help prepare for special programs
   - Photocopying
   - Cut out storytime projects
   - Organize fingerplays or flannelboards
   - Cut scrap paper
   - Check puzzles and games

2. Junior volunteer checklist:
   - Be on time.
   - Dress neatly.
   - Respect library rules.
   - Call the Youth Services department if unable to work that day, (630)879-1393, ext. 500.
   - Sign in and out during volunteer times.
   - Visit with friends after volunteer hours.

Still interested? Great! Now, you’ll need to fill out the attached application and return it to the Youth Services Desk no later than the date noted on the application for the session you are interested in. All applications will be reviewed. Students selected as junior volunteers will be notified of their schedules prior to their start date.

If you have any questions please feel free to contact Joanne Zillman or Ruth Arrott at the Library, (630) 879-1393, ext. 500.

Joanne Zillman
Youth Services Manager
Junior Volunteer Application
(Please print)

Name: ___________________________ Date: ______________________

Address: ___________________________________________________________________

City: _____________________________ Home telephone: _________________________

Library card number of student (or parent): ________________________________

Grade: _______________ Age: ___________ Birth date: ________________

School: ___________________________________________________________________

Parents’ Names: ____________________________________________________________

Name(s) and telephone number(s) of person(s) to contact in case of emergency:

Name: ___________________________ Telephone: ___________________________

Name: ___________________________ Telephone: ___________________________

Have you ever volunteered or worked for pay before? ___Yes ___ No

If yes, what did you do? ___________________________________________________

Why do you want to work as a junior volunteer at the Batavia Public Library? Please write your response here:

(application continues on back)

Please return your completed application to the Youth Services Desk. See application deadline next to the session preferred.
Name: _____________________________________ Phone number: __________________

Please indicate the session or sessions you are interested in and as many days and times as possible that you would be available to work. Although there are a limited number of spaces during the school year, we will try to accommodate as many as possible.

Scheduling will be based on the date the application is returned to the Youth Services Desk. Please give as many options as possible and return the application early!

SESSION:

<table>
<thead>
<tr>
<th>Yes ___</th>
<th>No ___</th>
<th>September 11 – Nov. 4, 2017</th>
<th>(Application deadline 9/5/17)</th>
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</thead>
<tbody>
<tr>
<td>Yes ___</td>
<td>No ___</td>
<td>January 8 – March 3, 2018</td>
<td>(Application deadline 12/22/17)</td>
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<tr>
<td>Yes ___</td>
<td>No ___</td>
<td>April 2 – May 26, 2018</td>
<td>(Application deadline 3/23/18)</td>
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Days and times available to volunteer: (check all that apply)

<table>
<thead>
<tr>
<th>Days</th>
<th>4 -5 p.m.</th>
<th>5 – 6 p.m.</th>
<th>6 – 7 p.m.</th>
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<tbody>
<tr>
<td>Monday</td>
<td>________</td>
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<td>Tuesday</td>
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<td>Friday</td>
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<tr>
<th>Days</th>
<th>10 – 11 a.m.</th>
<th>2 – 3 p.m.</th>
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<tbody>
<tr>
<td>Saturday</td>
<td>_________</td>
<td>_________</td>
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</tbody>
</table>

If you have any special scheduling problems or needs, please indicate these here:

Junior volunteers are expected to abide by the rules of the Library and to conduct themselves in a manner which is in accordance with these rules.

______________________________________________________   ________________
Junior volunteer signature          Date

_______________________________________________________________   ______________________
Parent’s signature            Date

Please return your completed application to the Youth Services Desk. See application deadlines next to the session(s) preferred.