

To apply, please complete both sides of this application, detach and return it by May 1 to the library where you want to volunteer this summer as a member of the Teen Team. Some locations may fill their available Teen Team positions prior to May 1, so turn in the application to your preferred library as soon as possible. If you are completing this application after May 1, please check with your library to see if there are openings still available and return the form as quickly as possible. Volunteers are expected to complete their own application. If selected for an interview, your librarian will contact you.

Name		Date of birth		Age	
Addressstreet		-14.	.11.		
Phone	School	•	state	•	
What are your pronouns? (optional) _		_ Please check thi	s box if you w	ould like a pronoun button 🔲	
Email					
T-shirt size: (adult size) (circle one)			XXXL		
Parent's name		Parent's phone			
Parent's email					
EMERGENCY CONTACT (other than par	rent listed):				
Name		Relationship			
Phone (H)	Phone (W)		_ Phone (Cell)		
List one adult (other than a relative) whom we can contact for a reference: (ex: teacher, coach, church member)					
name	address			telephone	
Why are you interested in working as a Teen Team member?					
Why do you think you would make a good Teen Team member?					
Describe any past experience working with children, and/or volunteer or work experience, if any.					
Are there times when you are not available to work this summer? When?					
Do you have any dietary restrictions or food allergies? If so, please list them here.					
Are you interested in wearing the Buddy Bookworm costume to promote the Summer Reading Program?					

Would you be interested in becoming a year-round volunteer for the library?







WORK AGREEMENT

THE LIBRARY AGREES:

- To provide you, as a volunteer, with a safe work environment.
- To provide supervision and training by a member of the library staff, who will answer your questions and provide feedback regarding your work.
- To recognize your contributions as a volunteer to the success of the library.

AS A TEEN VOLUNTEER, I AGREE:

- To adhere to all Tulsa City-County Library policies and procedures.
- To call my supervisor as soon as possible if I am unable to report to my shift at the library.
- To arrive on time and check in with staff upon my arrival.
- To dress appropriately and report to the library in my Teen Team T-shirt.
- To report my volunteer hours on the volunteer time sheet.

AS A PARENT, I AGREE:

- To encourage my teenager to strive for good work habits and attendance.
- To be responsible for all transportation and to ensure that my teenager arrives on time and is picked up within 15 minutes of the end of their shift.
- To emphasize the importance of my teenager's volunteer responsibility.

TCCL COVID-19 SAFETY PROTOCOLS FOR VOLUNTEERS ADDENDUM

- All individuals are still required to monitor symptoms daily, stay home if they are sick or experiencing COVID-19 symptoms, and report to their supervising manager if they test positive for COVID-19 or have had close contact with someone who tested positive, regardless of their vaccination status.
- Whether the volunteer is at home or at work, volunteers need to contact their supervisor if experiencing symptoms. This ensures appropriate contact tracing and that volunteers are provided support in accordance with privacy regulations. Volunteers may return to work on-site once they can attest that they are not experiencing symptoms and have notified their supervisor that they are able to return.

Prospective Volunteer's Signature	Date
Parent's Signature	Date