



Youth Volunteer Application

For middle school & high school students (ages 10 & up).

(Youth with court-ordered community service must contact the Youth Services Librarian, Jennifer Wharton, directly, to discuss whether the library can accommodate them. [✉ jwharton@elkhorn.lib.wi.us](mailto:jwharton@elkhorn.lib.wi.us) [☎ 262-723-9143](tel:262-723-9143))

Personal Information:

Name: _____ Age: _____

Address: _____ City: _____

Phone: _____

Email: _____

Emergency Contact:

Name: _____

Phone: _____

Relationship: _____

Volunteer Goals:

Why do you want to volunteer at Matheson Memorial Library? _____

Do you need volunteer hours for a class or school program (See note above regarding court-ordered community service)?

If yes, how many hours and when do they need to be completed? _____

No

Parent or Guardian Permission Required for Volunteers Under 18

I give my permission for child _____ to volunteer at the Matheson
(print volunteer's name)
Memorial Library.

Signature _____ Date: _____

(Parent's Signature)

Non-Discrimination Policy

It is the policy of Matheson Memorial Library not to discriminate against any applicant or volunteer on the basis of race, gender, religion, or physical disability.

Volunteer Agreement

These are the requirements for all of the volunteers in the Youth Department:

1. All volunteers must behave appropriately. Illegal, dangerous, destructive, or insubordinate behavior will immediately terminate the volunteer's position at the library.
2. Appropriate clothing must be worn while on duty (jeans/shorts and t-shirts are ok). Clothing should not include offensive messages.
3. Volunteers must be on time for their work shifts. Repeated tardiness or absence will be cause for dismissal from the volunteer program. If a volunteer must be late or is unable to work, then the volunteer should call the library or contact one of their library supervisors.
4. Everyone must be treated with respect and consideration while at the library. This includes volunteers, patrons (children and adults), and library staff. Report any harassment to your volunteer supervisor.
5. According to state law, library records must be kept confidential. Things that a volunteer learns on the job about patrons and/or library records must be kept private.

I, _____ understand and agree to these terms.
(Print volunteer's name)

I certify that all information provided on this application is true and complete to the best of my knowledge.
I understand, as a volunteer, that I must abide by the library's policies.

Signature _____ Date: _____
(Volunteer's Signature)

Completed forms can be dropped off or sent to:

Jessica Dowling at 101 N. Wisconsin St. Elkhorn, WI 53121 or emailed to jdowling@elkhorn.lib.wi.us.