



Student Volunteer Application

Name _____
Last Middle First

Address _____
Street City State Zip

Home Phone _____ Alternate Phone _____

Email _____ Drivers License Number _____

Emergency Contact _____ Emergency Phone _____

STUDENT INFORMATION

Education (*circle currently attending or going into*) Middle School: 7 8 High School: 9 10 11 12

What school are you attending? _____

Will you receive school credit for volunteering? _____

Do you have other volunteer experience? If yes, please describe: _____

At which branch do you wish to volunteer? (check all that apply)

Main Branch ___ Addison ___ Britton ___ Clayton ___ Deerfield ___ Onsted ___

Please list any skill, special training, degrees, work experience, or interests that you have that may contribute to your volunteer efforts (examples: foreign language, artistic, calligraphy, etc.)

I certify that I have answered and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for volunteer position. I understand that the information contained on my application will be verified by the Lenawee District Library and that misrepresentations or omissions may be cause for immediate rejection as an applicant or my termination as a volunteer.

I further understand that my volunteer service may end at any time for any reason with or without cause and with or without notice.

Applicant's Signature

Date

Parent/Guardian's Signature

Date