



Medina County District Library

Student Volunteer Application

Thank you for your interest in volunteering for Medina County District Library. It is our expectation that our volunteer applicants are willing to make a regular commitment to a schedule (depending on the particular volunteer position) and that you will be willing to volunteer for a minimum of three months. Student volunteers must be 12 years old or entering grade 6.

At what location(s) would you like to volunteer? If you would be willing to volunteer at more than one location, please number in order of your preference.

Brunswick **Buckeye** **Highland** **Lodi** **Medina** **Seville** **Outreach**

Please Print

Name _____ Date _____

Address _____ City _____ Zip _____

E-mail _____ Phone _____ Birthday _____

In case of an emergency, contact _____

Relationship _____ Phone _____

Are you volunteering to fulfill requirements for community service? _____

If so, for what organization? _____

If court ordered please provide contact name and phone number _____

Why would you like to volunteer at the library? _____

List any other educational or volunteer experience you would like us to know about _____

Skills & Abilities:

Previous Library Experience: Check any that apply.

Frequent library user Shelving Books Checking in books Other

Student volunteers are very appreciated for keeping our children's materials looking very nice and clean. Most of our student volunteers begin their role at the library spending a great deal of time helping with the cleaning of books before moving on to other tasks.

Availability: Typically most of our student volunteers work 1-2 hours shifts. Please check times you are available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9:00 am - 10:00 am						
10:00 am - 11:00 am						
11:00 am - 12:00 pm						
12:00 pm - 1:00 pm						
1:00 pm - 2:00 pm						
2:00 pm - 3:00 pm						
3:00 pm - 4:00 pm						
4:00 pm - 5:00 pm						
5:00 pm - 6:00 pm						
6:00 pm - 7:00 pm						
7:00 pm - 8:00 pm						

Circle the months that you are able to volunteer:

January February March April May June July August September October November December

I verify that the statements made in this volunteer application are true and any misrepresentations or omissions may be cause for termination.

I understand that if I am unable to fulfill a scheduled time for any reason, I am to notify my volunteer liaison as soon as possible. Failure to comply may be reason for termination.

I understand that I will not be paid for my volunteer service.

I understand that MCDL respects our member's right to privacy and confidentiality and I will be loyal to the mission, values, goals and policies of MCDL.

The library reserves the right to screen all volunteers for aptitudes, schedule availability and preferences before being placed in available opportunities. Volunteers are placed on best fit and not all prospective volunteers can be accepted.

By completing this form, you are certifying that you are willing to make a commitment of about four hours per month over a three month period.

Volunteer Applicant's Signature _____ Date _____

Signature of parent/guardian _____ Date _____

I am available for volunteer service starting _____

Please return this application to any Medina County District Library location or mail to:

Medina County District Library, Volunteer Coordinator
45 North Center Street, Seville, OH 44273

Staff Use Only

Liason Name _____

Entered in database Yes No