

# Monona Public Library

## 2018 Summer Junior Volunteer Application Form

### SKILLS & RESPONSIBILITIES

The Summer Junior Volunteer (JV) program is for kids entering grade 6 to entering grade 12. It is an opportunity for you to interact with young children, demonstrate cooperation and responsibility, and develop good work habits. If you are interested and can commit to 25 or more hours of regular, weekly volunteer service during open hours, between **June 14 and August 24**, read and complete this Application Form by the deadline.

Volunteering at the library looks great on applications and provides valuable experience and references for part-time jobs, scholarships, and colleges. After you complete your volunteer assignment, you will receive an award, a letter of reference for your resume folder, and an invitation to a special recognition gathering for Summer Junior Volunteers.

### WHAT DO TEEN VOLUNTEERS DO?

Help children, teens, and adults sign up for the Reading Program; give out reading incentives; record data; help set up, run, and clean up after events; and provide valuable assistance to library staff.

### SKILLS

1. Reliable; honest; mature.
2. Respectful to children, their parents, and library staff.
3. Thinking ability; problem solving; creativity; enthusiasm; initiative.
4. Enjoy reading and using the library.

### REQUIREMENTS

1. Familiarize yourself with how the reading program works; check your Training Handouts as needed.
2. Assist with Reading Club enrollment; hand out & record reading awards; help with events as assigned.
3. Set a good example for others by reading when you are at the desk. Be respectful to staff and patrons.
4. Join the reading program and complete it by the deadline!

### RESPONSIBILITIES

1. Dress and grooming should be clean, neat, and appropriate for a representative of the library.
2. Arrive on time, use appropriate language, speak quietly, conversation with friends kept to a minimum.
3. Behave responsibly, respectfully, and maturely at all times.
4. Do not enter any library offices or go behind the Main Desk without permission.
5. Let Youth Services staff ([youth@mononallibrary.org](mailto:youth@mononallibrary.org)) know about schedule changes or if you exchange hours with other volunteers.
6. Call the library immediately if an emergency prevents you from working your shift.
7. Do not initiate discussion of religious, political, or other personal matters with children or adults.
8. Do not attempt to contact patrons outside of the library setting; do not offer to take children anywhere.
9. Report any concerns or problems to a library staff member immediately.
10. Library Computers should only be used for updating summer reading program information- not for games, Facebook, or anything other than official reading program business.

### EXTRA TASKS

Keep the children's room neat and clean; pick up books, put away puzzles, dust shelves, read, etc. Ask [youth@mononallibrary.org](mailto:youth@mononallibrary.org) for other ideas or to make a suggestion.

### NOTES

We will write a letter of recommendation for volunteers who have completed at least 25 hours of service, have shown outstanding library behavior, and have demonstrated enthusiasm and commitment in working at the library and with library staff. You may be dropped from the program with or without warning if you fail to meet the above responsibilities listed.

**QUESTIONS?** Rob, Angela, Karen at 608-216-7453 or [Youth@mononallibrary.org](mailto:Youth@mononallibrary.org)

# APPLICATION

**Deadline: The last Tuesday of May at library closing.** Thank you for your interest in the Summer Volunteer program. Your application may be disqualified if you fail to complete all of the information in each section of this application, including your letter, two references, your signature, and the signature of your parent(s). We will contact you *via email* or phone within two weeks after the deadline to let you know if you were accepted into the program *or not*. **Please make sure you regularly check the email you provide below!** We get more applicants than we can take -- if you don't get in, please try again next year.

**(Complete this form - Please print neatly. Neatness & completeness are considered when choosing volunteers.)**

NAME \_\_\_\_\_ AGE \_\_\_\_\_

HOME PHONE(S) \_\_\_\_\_ CELL PHONE \_\_\_\_\_

CURRENT GRADE \_\_\_\_\_ CURRENT SCHOOL \_\_\_\_\_

EMAIL \_\_\_\_\_

(We will use this email to let you know if you are accepted to the program – make sure you have access to this email through June 10)

STREET ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PARENT'S NAME(S) \_\_\_\_\_ WORK PHONE \_\_\_\_\_

\_\_\_\_\_ WORK PHONE \_\_\_\_\_

PARENT EMAIL(S) \_\_\_\_\_

## SHIRT

The Friends of the Monona Library provide a T-shirt for Summer Volunteers.

Mark 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> choice. Adult Lrg \_\_\_\_ Adult Med \_\_\_\_ Adult Sml \_\_\_\_

## REQUIRED TRAINING

You are required to attend at least one training; each training session below is the same. Please mark the date that works best for you. Bring your calendar (summer plans), pencil, & notebook to the training.

\_\_\_\_\_ **Monday, June 11: 6 to 7:30PM**

\_\_\_\_\_ **Wednesday, June 13: 10:00 to 11:30AM**

*Teen Volunteering was a good way to spend two summers.  
It was also a good way to get to know other young adults and library staff.  
And now, I work at the library! Rob*

*Volunteering has opened up my path of opportunities. The program helped me get a job and helped me with meeting new people. Michaela*

## MONONA LIBRARY SUMMER HOURS

Monday - Wednesday 9:00 a.m. to 8:00 p.m.;

Thursday & Friday 9:00 a.m. to 6:00 p.m.;

Saturday 9:00 a.m. to 5:00 p.m.

# REQUIRED: Complete thoroughly and neatly.

## 1. Two References *and* letters required, *not* from a relative. Example: Teacher, neighbor, employer, etc.

**Print clearly.** Please attach the letters of reference; letters may also be submitted by email ([youth@mononallibrary.org](mailto:youth@mononallibrary.org)). Reference letters should include how reliable, honest, and trustworthy you are, your work ethic history, and your communication and people skills.

1 | Name \_\_\_\_\_ Relationship to applicant \_\_\_\_\_  
Reference Letter included \_\_\_\_\_ Reference letter emailed \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

2 | Name \_\_\_\_\_ Relationship to applicant \_\_\_\_\_  
Reference Letter included \_\_\_\_\_ Reference letter emailed \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

## 2. Include a *handwritten* letter and include the following: (a picture of yourself is optional, but welcome)

- \_\_\_ Tell about other volunteering you have done, your recreational interests, your special skills.
- \_\_\_ Have you participated in library summer reading programs in the past?
- \_\_\_ Why do you want to volunteer? Have you applied to be a Monona Library volunteer in the past?
- \_\_\_ Why should we pick you as a Summer Junior Volunteer?
- \_\_\_ How will you benefit from working as a volunteer at the library?

## 3. Required: Please read the application thoroughly, front and back. Complete all sections, and sign below.

- \_\_\_ I have read the above application form completely.
- \_\_\_ I agree to work responsibly and conscientiously at my volunteer duties.
- \_\_\_ I will work for at least 25 hours between **June 14 and August 24** as a Summer Volunteer.
- \_\_\_ I will behave appropriately in the library, limiting computer use to only volunteer responsibilities.
- \_\_\_ I will call other Summer Junior Volunteers to try to find a substitute if I cannot work on my scheduled date/time.
- \_\_\_ I will call the library if an emergency prevents me from working my shift.
- \_\_\_ I will keep track of my time worked and duties performed on the Time Sheet provided.

**TEEN VOLUNTEER SIGNATURE:** \_\_\_\_\_

## 4. Required: PARENT/GUARDIAN PERMISSION: (Please sign agreement to the following conditions)

Your child's name, phone, and email *will be included on a substitute list* so that Summer Junior Volunteers may make arrangements for someone to cover their scheduled time if they take off due to vacations and emergencies. We use a group email ([jvmonona@mononallibrary.org](mailto:jvmonona@mononallibrary.org)) to send announcements. Volunteers are responsible for checking email regularly and knowing their work schedules.

1. I have completely read the application form with my child and agree with the information provided.
2. I agree to help my child be responsible for the time they sign-up to work their volunteer hours & I will send food with my child if they are working through a lunch or dinner hour.
3. I consent to the use of photographs or videos of my child taken during community service by any representative of Monona Public Library or any TV or paper news reporter, in exhibits, or any media this year and in the future (newsletter, library website, Instagram, promotional posters, brochures, etc).

**PARENT/GUARDIAN SIGNATURE(S)**

**Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# CITY OF MONONA

## VOLUNTEER AGREEMENT

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In consideration for being permitted by the City of Monona ("the City") to perform the volunteer activities described in the attached Volunteer Project Information Sheet, I agree as follows:

I agree to comply with all rules and regulations which may be required by the City in regards to volunteer activities and immediately cease such activities upon request by the City. I understand that the activities may involve risks of injury, loss or damage, including but not limited to, bodily injury, sickness, disease, death, and property loss or damage. I recognize the inherent danger involved, take full responsibility for my actions and physical condition and assume all such risks. I release and hold harmless the City, its elected and appointed officials, officers, employees, and authorized representatives from any liability, claims, demands, damages, legal actions, costs, and expenses, including attorneys' fees, of whatsoever kind or nature (including those listed above) which arise from any injury to myself during my participation in the volunteer activities and any injury, loss or damage to other persons or property arising from my negligence.

I understand that I will receive no compensation from the City for the volunteer activities. I understand that I will be performing the volunteer activities without any supervision or guidance by any City employees or officials and will not be considered an employee or agent of the City for any purpose. I represent to the City that I am in good physical health and have no health restrictions which would preclude me from safely performing the volunteer activities.

I agree to be solely responsible for ensuring that my property and equipment is used safely and properly maintained. I shall have sole responsibility for the protection of my property against theft, damage or loss. I will remove all equipment and debris generated by the volunteer activities from City property immediately upon the earlier of (1) completion of the volunteer activities or (2) 15 days from the date of this agreement.

**I HAVE READ THIS ENTIRE DOCUMENT PRIOR TO SIGNING IT.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed/typed name)

\_\_\_\_\_  
Date

PARENT/LEGAL GUARDIAN:

I am the parent or legal guardian of the above minor volunteer. I have read this entire agreement and consent to the child participating in the volunteer activities. I agree to take full responsibility for the safety and actions of the child. At all times the child is performing any volunteer activities he or she will be either under my direct supervision and control or that of another responsible adult in whose care I have placed the child. I agree to be bound by all provisions of the agreement, including but not limited to, the release, hold harmless and indemnity provisions.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed/typed name)

\_\_\_\_\_  
Date