

# Matteson Area Public Library District Summer Volunteer Application 2018

<u>Library Use Only</u>
Date Received:
Time Received:

## WHO CAN VOLUNTEER:

- Applicants must be entering 6<sup>th</sup> through 12<sup>th</sup> grades in the 2018-2019 school year.
- Applicants must have a library card in good standing; people with fines greater than \$5 will not be considered.
- Applicants should live in Rich Township. Matteson residents will be preferred. If additional volunteers are needed, applicants who are not Matteson residents will then be considered.

## HOW TO APPLY:

- Fill out all pages of the application completely. Please read directions carefully and please print!
- **First time applicants must provide one reference from an adult who is NOT a relative.** Please give that person the attached form and allow them at least a week to complete it. Please return your reference form with your application.
- Completed applications are due at the library by end of business on Tuesday, May 1<sup>st</sup>. Applicants will be notified of their acceptance by Friday, May 18<sup>th</sup>.

## VOLUNTEER REQUIREMENTS:

- Volunteers will be expected to complete a minimum of 6 hours of volunteer work during the summer.
- Volunteers must participate in the reading portion of the Summer Reading Program.

## INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

### PLEASE PRINT. Information continues on the next page

*(All fields are required. If a student doesn't have their own email, an adult's email is sufficient.)*

Applicant's Name:			
Address:			
City:			
Primary (Best) Phone Number:			
Type of Primary Phone:	<input type="checkbox"/> Home Phone	<input type="checkbox"/> Parent/Guardian's Work Phone	Name of Person who Holds the Primary Phone:
	<input type="checkbox"/> Applicant's Mobile Phone	<input type="checkbox"/> Friend/Relative's Phone	
	<input type="checkbox"/> Parent/Guardian's Mobile Phone		
Alternate Phone Number (preferably one to reach an adult):			
Type of Alternate Phone:	<input type="checkbox"/> Home Phone	<input type="checkbox"/> Parent/Guardian's Work Phone	Name of Person who Holds the Alternate Phone:
	<input type="checkbox"/> Applicant's Mobile Phone	<input type="checkbox"/> Friend/Relative's Phone	
	<input type="checkbox"/> Parent/Guardian's Mobile Phone		
Applicant's Email:			
Parent/Guardian's Email:			
Applicant's Library Card Number:			

**Applicant's Name:** \_\_\_\_\_

School You CURRENTLY Attend <u>and</u> CURRENT Grade:
School You Will Attend NEXT School Year:
Have you been a summer reading volunteer at the Matteson Area Public Library District previously? If so, what year(s)?

**Applicant and Parent/Guardian: Please read the following and sign.**

- I understand that this application is a request to volunteer at the Matteson Area Public Library District during the Summer Reading Program 2018.
- I understand that applicants might be asked to go through an interview with library staff.
- I understand that applicants will be considered based on their availability and skill matching. The order in which applications are received is less relevant, as long as the complete application is turned in by May 1<sup>st</sup>.
- I understand that not all applicants might be selected as volunteers. Volunteer selection will be determined by the needs of the library.
- I understand that volunteer work will be available in June and July, also possibly in May and August.
- I understand that volunteers will be assigned times to work and jobs to do based on the availability they provide on the application as well as the schedule of available library volunteer jobs.
- I understand that selected volunteers will be required to attend a training session in May or June and will at that time receive further information about volunteer requirements and responsibilities. The training date will be given to accepted volunteers.
- I understand that volunteers must provide their own transportation to and from the library.
- I understand that volunteers cannot watch younger children when they are volunteering.
- I understand that volunteers are not library employees and will receive no compensation.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

Applicant's Name: \_\_\_\_\_

## Your Summer Schedule

Please fill out 2 different calendars to complete the application!

*Applications that do not have the schedule filled out correctly will not be considered.*

### CALENDAR ONE DIRECTIONS:

- Please cross out dates that you are NOT AVAILABLE to volunteer with an "X."
- If you do not mark a date with an X it will be assumed you are available to volunteer on that date. (Volunteers will only be scheduled at times you list as available for any given weekday on the next calendar).
- Make any additional notes about specific dates below Calendar One.

CALENDAR ONE:					
What dates are you UNAVAILABLE?					
Mondays	Tuesdays	Wednesdays	Thursdays	Fridays	Saturdays
5/28*	5/29	5/30	5/31	6/1	6/2
6/4	6/5	6/6	6/7	6/8	6/9
6/11	6/12	6/13	6/14	6/15	6/16
6/18	6/19	6/20	6/21	6/22	6/23
6/25	6/26	6/27	6/28	6/29	6/30
7/2	7/3		7/5	7/6	7/7
7/9	7/10	7/11	7/12	7/13	7/14
7/16	7/17	7/18	7/19	7/20	7/21
7/23	7/24	7/25	7/26	7/27	7/28
7/30	7/31	8/1	8/2	8/3	8/4
8/6	8/7	8/8	8/9	8/10	8/11

**\*Monday 5/28 is Memorial Day & we might be looking for volunteers to walk in the Matteson parade with the library.**

**Please turn to next page for an additional calendar and to complete the application.**

**Applicant's Name:** \_\_\_\_\_

**CALENDAR TWO DIRECTIONS:**

- Please mark on the chart below days & times that you are *normally* available to volunteer during June & July 2018. (If there is a problem with a specific date, please note it on the previous calendar.)
- If you will be available, mark with “**Y**” for yes. (*The more squares marked with a “Y” the more chances to volunteer are available to you, and the more likely you will be accepted as a volunteer.*)
- If you don't yet know if you are available, mark with a question mark “?”.
- No symbols other than “**Y**” or “?” should be used.

<b>CALENDAR TWO:</b>						
<b>What times are you usually available on each day of the week?</b>						
<b><i>Times</i> ↓</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>
<b>9:30 to 10:30 AM</b>						
<b>10:30 to 11:30 AM</b>						
<b>11:30 AM to 12:30 PM</b>						
<b>12:30 to 1:30 PM</b>						
<b>1:30 to 2:30 PM</b>						
<b>2:30 to 3:30 PM</b>						
<b>3:30 to 4:30 PM</b>						
<b>4:30 to 5:30 PM</b>					<i>Library Closed</i>	<i>Library Closed</i>
<b>5:30 to 6:30 PM</b>					<i>Library Closed</i>	<i>Library Closed</i>
<b>6:30 to 7:30 PM</b>					<i>Library Closed</i>	<i>Library Closed</i>
<b>7:30 to 8:30 PM</b>					<i>Library Closed</i>	<i>Library Closed</i>
<b>Anything else we need to know about this day of the week?</b>						

(Please note that there are *very few* volunteer opportunities available on evenings and weekends.)

**ONLY FIRST TIME APPLICANTS  
NEED TO TURN IN THIS  
RECOMMENDATION FORM.**

## Matteson Area Public Library District Student Summer Volunteer Recommendation Form

This form should be filled out by an adult who knows the applicant but is **not** a relative.

The Matteson Area Public Library District accepts volunteers who are entering 6<sup>th</sup> to 12<sup>th</sup> grades to work as summer reading volunteers. Recommenders, please fill out the form below regarding the volunteer applicant. Feel free to use the reverse if needed. This form does not need to be typewritten. This form needs to be returned to the Matteson Library by May 1<sup>st</sup>.

Name of Applicant: \_\_\_\_\_

1) For how long and in what capacity do you know the applicant?

2) Do you have any experience working with the applicant (in either a paid or volunteer setting)? Please describe.

3) Do you feel the applicant is responsible enough to do 8 to 10 weeks of volunteer work (for 2-5 hours a week), arriving on time, and completing assigned tasks?

Very Responsible

Adequately Responsible

Not Very Responsible

4) Do you recommend this applicant as a summer volunteer?

Highly

Adequately

With Limits or Reservations (Write Below)

No

5) Do you have any other comments regarding this applicant?

Recommender's Name \_\_\_\_\_

Recommender's Signature \_\_\_\_\_

Date \_\_\_\_\_