



TEEN VOLUNTEER APPLICATION

**ALVIN SHERMAN LIBRARY, RESEARCH &
INFORMATIONTECHNOLOGY CENTER**
3100 Ray Ferrero, Jr. Blvd
Fort Lauderdale, FL 33314



PERSONAL INFORMATION—PLEASE PRINT LEGIBLY—MUST BE BETWEEN THE AGES OF 14-18

Last Name:	First Name:	Middle Name:	
Current Address:		City:	State: Zip Code:
Primary Contact Phone Code: <input type="checkbox"/> Home <input type="checkbox"/> Cell	Other Contact Phone:: <input type="checkbox"/> Home <input type="checkbox"/> Cell		Email Address: <hr/>
Birth Date:		Library Card#	
<p><i>An Alvin Sherman Library card or Nova SharkCard is required of all volunteers. Please see the attached library card application for information. Library card number must be provided in order for application to be considered complete.</i></p>			
<p>***Applications are accepted on a rolling basis. Applicants are assigned to an orientation based on when their application is received and the number of available volunteer positions. All applicants are notified of their assigned orientation date and time by email. Due to the high volume of applications received by the library, applicants who report to an orientation they have not been assigned to may be turned away.***</p>			

EMERGENCY INFORMATION

Parent/ Guardian <input type="checkbox"/> Other <input type="checkbox"/>	Last Name:	First Name:	<input type="checkbox"/> Home <input type="checkbox"/> Cell Email:
Emergency Contact's phone#		Emergency Contact's relationship to you:	

VOLUNTEER AVAILABILITY

- Volunteer schedule assignments are based on the needs of the department and will only be finalized upon completion of the Teen Volunteer Orientation.
- Volunteers are generally scheduled for 2 hour shifts, once or twice a week, and may be scheduled for more hours during special events. Volunteers may not exceed 39 hours per month.
- I am available to accept shifts on the following days/times: *Choose hours between 10am-8pm Mon.-Fri.; 10am-7pm Sat.; 11am-8pm Sun.*

<u>Days:</u>	<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
<u>Times:</u>							

SIGNATURES

I certify that all statements in this application are true. I also agree that if I am accepted as a volunteer, I will abide by all policies and procedures of NSU regulating my volunteer service.

(Volunteer -Print Name)

(Signature)

(Date)

(Parental/Guardian -Print Name-required if volunteer is under 18 years of age)

(Signature)

(Date)

(Department Head /Coordinator Print Name &Title)

(Signature)

(Date)