

**Volunteer Interest Form**  
Young Adult Department  
North Riverside Public Library

This form must be completed in **full** by the volunteer applicant and parent / guardian **and** returned to the Young Adult Help Desk or email [teen@northriversidelibrary.org](mailto:teen@northriversidelibrary.org)

After review, we will contact you regarding our volunteer opportunities.

Full Name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Why are you interested in volunteering at the library?: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will volunteering fulfill a **(circle one)**: community service requirement /court ordered/other  
If so, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How many hours do you need to complete?: \_\_\_\_\_

Will you need a confirmation of your volunteering hours? **(circle one)**: yes/no

If so, to whom should this be sent to?: \_\_\_\_\_

**OR** bring appropriate form to fill out by library staff member.

Applicant Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Thank you for your interest!