

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@nrpl.info

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!