#### Benicia-Public-Library-Pins-v5Benicia Public Library: School Year

#### Teen Volunteer Application 2025 – 2026

Note: Forms 2 and 3 below need only be filled out by NEW volunteers.

* + - 1. Library Teen Volunteer Application: for new and returning teen volunteers
			2. City of Benicia Volunteer Application and Waiver: for new volunteers only
			3. Essay: for new volunteers only.Type a 150-word essay describing your interests, talents, & why you want to volunteer. Email to aangell@ci.benicia.ca.us. *Handwritten essays will not be accepted*.

REQUIRED COMMUNITY SERVICE? *See below for details.*

Name (First & Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred name: \_\_\_\_\_\_ \_\_\_\_\_\_

Pronoun(s): \_\_ \_\_\_\_ Birth Date: \_\_\_\_\_\_ \_\_\_\_ Age: \_\_­­\_­­\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_ \_\_ \_

Email (required)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent’s Phone: \_\_ \_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/ Zip code \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School Graduation year: \_\_­\_ \_

How did you hear about our Volunteer Program? (Please list names if you heard from a friend.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check here if you need reasonable accommodations to be a Teen Volunteer.**

**VOLUNTEER SHIFT OPTIONS**

*We will try to accommodate your desired shift, but it may be necessary to be flexible.*

*Depending on the Library availability, Teen Volunteer Shifts may change.*

**Wednesdays 4:00 – 6:00 PM *(Starts September 3, 2025)***

**Thursdays (experienced volunteers only) 6:15 – 8:15 PM *(Starts September 4, 2025)***

**Check this box if you can’t join a regular shift, but would like to help with special events.**

You may be asked to leave the Library on foot to do errands related to Library programming or to help other staff with special projects. By turning in this form, you agree to complete tasks as assigned.

**REQUIRED COMMUNITY SERVICE**

**Check here if you have required community service.**

If you have required community service through school, a service organization, the BUSD Diversion program, or it is court mandated, you need to get permission from the Teen Services Librarian before telling your organization you have been accepted.Please fill out the following information:

* Organization or program:
* Name of contact or advisor:
* Email or phone of contact:
* Number of hours required:
* Deadline for completion:

#### Benicia-Public-Library-Pins-v5Benicia Public Library: School Year

#### Emergency Contact | Parent Signature 2025 – 2026

#### Emergency Contact Information: *someone other than parent or guardian*

Name/ Relationship:

Cell Phone Number(s):

For the parent/ legal guardian *(or the Teen Volunteer, if 18 years or older*):

My child has my permission to do volunteer work at the City of Benicia Public Library. I understand that the library is not responsible for monitoring the attendance of my child.

I hereby give my consent to the City of Benicia Public Library to authorize any medical or surgical care for (me) my child, should an emergency arise where such service is indicated. I further understand that I am responsible for costs associated with any such treatment. It is understood that a conscientious effort will be made to notify me before such action is taken, but if it is impossible to locate me, the expense of this service will be accepted by me.

Any work created or produced, as a volunteer for the City of Benicia Public Library, shall be the sole property of the City of Benicia. By signing below, I expressly grant any copyrights or other ownership or interest in such work to the City of Benicia.

I hereby grant permission for the above-named Teen Volunteer participant’s (my) photograph and name to be published in the media or on the Benicia Public Library website to promote events and programs at the Library.

Hold Harmless/Waiver of Liability: I, the undersigned, in consideration of participation in the teen volunteer program, agree to indemnify and hold harmless, and release, waive, and discharge the City of Benicia, its elected or appointed officers, officials, employees, agents and/or volunteers from and against any and all liability from any injury or property damage which may be suffered by the above named teen volunteer participant rising out of, or in any way connected with participation in the program, including injuries due to the active or passive negligence of the City, its officers, officials, employees, agents and/or volunteers, except for any injuries or damage caused by the sole gross negligence or willful misconduct of the City, its officers, officials, employees agents and/or volunteers.

I HAVE READ THE ABOVE HOLD HARMLESS AND RELEASE AGREEMENT AND FULLY UNDERSTAND THAT I ASSUME ALL RISKS FOR ANY INJURIES AND/OR PROPERTY DAMAGE SUFFERED FROM MY CHILD’S (MY OWN) PARTICIPATION IN THE PROGRAM.

Parent/Guardian Signature:

Signature of parent or guardian Printed name of parent or guardian Date

(Or Teen Volunteer if age 18 or older) (Or Teen Volunteer if age 18 or older)

*Electronic signature accepted*

#### Benicia-Public-Library-Pins-v5Benicia Public Library: School Year

#### Teen Volunteer Guidelines 2025 – 2026

Thank you for your interest in volunteering at the Benicia Public Library. In order to make this volunteer experience a good one for all, the following expectations have been established. Your signature below signifies that you have read and will follow these guidelines.

* Arrive on time for your scheduled shift.

If you will be late or must miss a shift, contact your supervisor at least 24 hours in advance: aangell@ci.benicia.ca.us

*Chronic tardiness may result in permanent dismissal from your shift.*

*You will be placed on probation if you miss your shift without notifying us in advance.*

* You will behave courteously to all Library staff, patrons and other volunteers. Inappropriate behavior can subject you to immediate dismissal from your volunteer shift and the Library. It may also result in permanent dismissal from the Teen Volunteer Program.
* My preference is that you do not use earbuds during your shift. But if you feel you need to use one, you may use only one. Keep at least one ear open.
* All cell phone use is prohibited during your shift. Silence your cell phone before the beginning of your shift.
* You are permitted in the staff areas of the Library only while volunteering.
* You may not socialize with your friends while volunteering (unless they are in your shift).
* When you are in the back office speak quietly as voices travel from cubicle to cubicle.
* When you’re working in the public area of the Library, patrons may approach you with questions. Please refer them to the Information Desk even if you are confident that you know the answer.
* Dress appropriately for your shift.
* Vending machines and staff restrooms are not to be used by volunteers.
* Before the end of your shift, you are expected to clean up everything you and the other volunteers have been working on.

Teen Volunteer Signature:

I have read and understood and agree to abide by the *Teen Volunteer Guidelines* (above).

I understand that failure to follow the *Guidelines* may disqualify me from being a Teen Volunteer*.*

Signature of Teen Volunteer Printed name of Teen Volunteer Date

*Electronic signature accepted*

**Benicia Public Library**

**150 East L St., Benicia, CA 94510**

aangell@ci.benicia.ca.us

[www.BeniciaLibrary.org/Teens](http://www.BeniciaLibrary.org/Teens)