



Benicia Public Library: Teen Volunteer Application

**Summer
2025**

HOW TO BECOME A TEEN VOLUNTEER: Pick up the forms at the Library & follow the instructions.

1. **Library Application: *New & returning volunteers*.** Fill out completely & legibly in ink.
2. **City of Benicia Application: *New volunteers only*.** Fill out City of Benicia application.
Return BOTH applications to the Library. Due: 6/01/2025
3. **Essay: *New volunteers only*.** Type a 150-word essay with your interests, talents, & why you want to volunteer. Email to aangell@ci.benicia.ca.us . *Handwritten essays will not be accepted.*

REQUIRED COMMUNITY SERVICE: Fill out the section at the bottom of this page if your hours are required by an outside organization. Your application must be approved by the Head of Youth Services, Alli Angell, *before* you tell your organization.

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 name(s) if you heard from a friend.)

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

Volunteers work one shift per week. Mark your preferred shift. (*Shifts are not guaranteed.*)

- ☐ **Tuesdays 6:15 – 8:15 PM** (June 10th – July 29th, except July 1st) - *Kids Summer Reading events & preparation for upcoming events*
- ☐ **Wednesdays 2:00 – 4:00 PM** (June 11th – July 30th, except July 2nd) *Kids Summer Reading events & preparation for upcoming events*
- ☐ **Thursdays 6:15 – 8:15 PM** (June 12th – July 31st, except July 3rd) – *Event prep and displays. Experienced volunteers only.*

REQUIRED SERVICE: *Check the box below that corresponds to you & fill out required information. Please email the Alli at aangell@ci.benicia.ca.us to set up a schedule.*

- ☐ School requirement: Number of hours: _____ Deadline: ____/____ School: _____
- ☐ Service organization: Number of hours: _____ Deadline: ____/____ Organization: _____
- ☐ Court mandated: Number of hours: _____ Deadline: ____/____ Officer: _____
- ☐ Diversion Program: Number of hours: _____ Deadline: ____/____ Officer: _____

FOR STAFF USE ONLY:

Date Received: _____



Benicia Public Library: Consent Form & Signatures

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For the Teen Volunteer:

I have read and understood and agree to abide by the *Teen Volunteer Agreement* (on next page).
I understand that failure to follow the *Agreement* may disqualify me from being a Teen Volunteer.

_____/_____/_____ Signature of Teen Volunteer	_____ Printed name of Teen Volunteer	_____/_____/_____ Date
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For the parent or 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.

_____/_____/_____ Signature of parent or guardian (Or Teen Volunteer if age 18 or older)	_____ Printed Name of parent or guardian (Or Teen Volunteer if age 18 or older)	_____/_____/_____ Date
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Emergency Contact Information: *Can also be the parent or legal guardian.*

Name/ Relationship: _____

Contact Number(s): _____



Benicia Public Library: Teen Volunteer Agreement

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KEEP THIS PAGE FOR YOUR RECORDS!

Thank you for your interest in volunteering at the Benicia Public Library. In order to make this volunteer experience positive for everyone, the following expectations have been established.

- Arrive **on time** for your scheduled shift, unless you have contacted Alli before your shift starts. *Chronic tardiness may result in dismissal.*
If you will be late or have to miss a shift, contact Alli before your shift starts. Do not send a message about your absence with another volunteer.
Alli Angell: **707.746.4741** or aangell@ci.benicia.ca.us
- You will be placed on probation if you miss your shift without notifying us in advance. *In an emergency, please notify us as soon as you can to clear an unexcused absence.*
- 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 Volunteering 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.
- You are only permitted in the staff areas of the Library while volunteering.
- You may not socialize with your friends who aren't also volunteers while volunteering.
- When you are in the back office speak quietly as my colleagues and I appreciate being able to work without disruption.
- When you're working in the public area of the Library, patrons may approach you with questions. Please refer them to the Customer Service Desk even if you are confident that you know the answer.
- Dress appropriately for your shift.
- Vending machines and staff restrooms are not available to volunteers.
- All cell phone use is prohibited during your shift. Silence your cell phone before the beginning of your shift.
- Before the end of your shift, you are expected to clean up everything *you and the other volunteers* have been working on.

Benicia Public Library
150 East L St., Benicia, CA 94510
707.746.4741 (to reach Alli)
aangell@ci.benicia.ca.us
www.BeniciaLibrary.org/Teens