



## Teen Library Volunteer

**Need volunteer hours? We offer teen 2 volunteer paths to choose from:**

1. Weekly scheduled volunteer hours.
  - a. To set up a weekly schedule please complete the attached form and return it to your local Long Beach Neighborhood Library.
2. Special events volunteer hours.
  - a. To help with special events, please complete the attached form and email to the Volunteer Services Librarian at [lbpl\\_volunteers@lbpl.org](mailto:lbpl_volunteers@lbpl.org)
  - b. Our Volunteer Services Librarian will contact you about opportunities to help with Library Special Events.

### **Qualifications:**

- Desire to help someone else.
- Punctual, friendly, patient, optimistic, and dependable.
- Relates well to a variety of people.

**Location:** To be determined

### **Weekly scheduled volunteers**

**Hours:** Commitment to work at least 1-2 hours a week

**Training:** Volunteers will receive an initial in-person orientation, training and schedule.

\*Volunteers work based on the needs of the library and may be released at any time.

For additional questions please contact the Volunteer Services Librarian by phone at (562) 570-7500 or by email at [lbpl\\_volunteers@lbpl.org](mailto:lbpl_volunteers@lbpl.org).

For more volunteer opportunities please visit the volunteer's opportunities page: <http://www.longbeach.gov/library/connect/volunteer-opportunities>



Date: \_\_\_\_\_

**Volunteer Application**  
(Please print or type)

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Hm: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Driver's Lic.#: \_\_\_\_\_ State: \_\_\_\_\_ Exp.: \_\_\_\_\_

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

Languages (if other than English): \_\_\_\_\_

Have you ever been convicted of a felony?  YES  NO

Do you require any special accommodations?  YES  NO If yes, please explain: \_\_\_\_\_

Who to contact in case of an emergency?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Please list all days and times you are available to volunteer: \_\_\_\_\_

Please check Long Beach Public libraries of interest:

- |  |   |
|--|---|
| <input type="checkbox"/> Billie Jean King Main Library | <input type="checkbox"/> Dana           |
| <input type="checkbox"/> Alamitos                      | <input type="checkbox"/> El Dorado      |
| <input type="checkbox"/> Ruth Bach                     | <input type="checkbox"/> Harte          |
| <input type="checkbox"/> Bay Shore                     | <input type="checkbox"/> Los Altos      |
| <input type="checkbox"/> Burnett                       | <input type="checkbox"/> Mark Twain     |
| <input type="checkbox"/> Brewitt                       | <input type="checkbox"/> Michelle Obama |

Please list skills or talents which you would be willing to share with others: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Parent's or Guardian's Signature: \_\_\_\_\_

**\*\*For office use only\*\***

Has the Applicant above been fingerprinted?  YES  NO If yes, fingerprint date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Staff Signature: \_\_\_\_\_ Site: \_\_\_\_\_ Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Long Beach Public Library

## Standards for Volunteering

### Mission Statement:

The Long Beach Public Library is committed to meeting the information needs of our culturally diverse and dynamic population.

- We provide quality library service through a staff that is responsive, expert, and takes pride in service.
- We offer a wide selection of resources and materials representing all points of view.
- We support lifelong learning, intellectual curiosity, and free and equal access to information.

### The Library expects to:

- Provide a safe working environment.
- Provide supervision and training necessary for assigned tasks.
- Treat volunteers as valuable contributors to the success of the library.
- Provide 15 minute breaks for every four hours of work.

### Volunteers are expected to:

- Keep as their number one priority, to provide outstanding, helpful and friendly service.
- Arrive to work on time and ready to work.
- Give ample notice and call immediately if unable to work at their assigned time.
- Dress appropriately. Denim is allowed if clean, free of rips, and is not baggy or too tight.
- Report to their supervisor or librarian in-charge upon arrival for work.
- Keep track of their hours by signing in and out each day.
- Wear their volunteer badge at all times. No exceptions.
- Be courteous to patrons and staff at all times.
- Immediately notify their supervisor or librarian in-charge of any problem situations or customer complaints.
- Use the telephones only for business calls.
- Use personal cell phones only for emergencies.
- Use the library's public computers only for assisting patrons.

The Library reserves the right to dismiss any volunteer for poor performance, excessive absenteeism or misconduct. Thank you for your interest in volunteering.

---

Volunteer Name *(Please print)*

---

Volunteer Signature

---

Parent's Name *(Please print)*  
*(For volunteers under 18 years of age)*

---

Parent's Signature  
*(For volunteers under 18 years of age)*

---

Supervisor's Name *(Please print)*

---

Supervisor's Signature



## CITY OF LONG BEACH VOLUNTEER

All City of Long Beach Volunteers must sign the waiver and release of claim below.  
If you are a minor (under 18 years of age) your parent or guardian must also sign this form.

Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

School Attending: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Parent / Guardian Name: \_\_\_\_\_

Parent / Guardian Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### RELEASE OF LIABILITY

"I waive and forever release and discharge the City of Long Beach, and it's officers, employees and agents from all liability, claims or losses arising from or attributable to my participation as a volunteer. I hereby waive the right to make any claim against the City of Long Beach, or its agents or employees, for any injuries or damages, charges or expenses, including attorney's fees, which might be sustained as a result of my participation as a volunteer for the City of Long Beach. This waiver is given in partial consideration for permission granted by the City of Long Beach to participate in City activities. I further understand the City does not provide any form of insurance for volunteers.

\_\_\_\_\_  
Volunteer Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature  
(if volunteer is a minor)

Date: \_\_\_\_\_