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## Youth Volunteer Application (Occasional)

Please print

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-Mail address that you regularly check \_\_\_\_\_

Phone number \_\_\_\_\_ Highest grade completed: \_\_\_\_\_

Which school do you attend? \_\_\_\_\_

Why do you want to volunteer at the Marshalltown Public Library? \_\_\_\_\_

\_\_\_\_\_

What special interests or skills do you have that may help us to match you with the best volunteer assignment? \_\_\_\_\_

\_\_\_\_\_

### AVAILABILITY:

Best day(s) & time(s) to volunteer: \_\_\_\_\_

How many hours do you want or need to complete? \_\_\_\_\_

Deadline to complete volunteer hours (if applicable): \_\_\_\_\_

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

\_\_\_\_\_  
Date

*Drop off your completed application at the library or mail it to the address at the top of the form. Diane Lemker, Volunteer Coordinator, will then contact you to arrange an interview.*