



# Melrose Public Library Teen Community Service Application

(Please return this form to Jill Connolly, YA Librarian, jconnolly@noblenet.org)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade level/Year of Graduation: \_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

Skills, Special Interests: \_\_\_\_\_

Physical Limitations/Allergies (for some jobs): \_\_\_\_\_

Number of Hours Needed: \_\_\_\_\_ Date Hours Needed by: \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Hours Available						

**Student's Signature**

Date

Parent/Guardian's Full Name: \_\_\_\_\_

Parent/Guardian's Daytime Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

**Parent/Guardian's Signature**

Date