



HARRIS COUNTY PUBLIC LIBRARY

Internship/Volunteer/Community Service Application

Personal Information

Name _____ Email _____

Address _____

Phone (Day) _____ Phone (Evening) _____

*You must be at least 14 years of age to volunteer. Individuals under 18 require a parent/guardian signature.

If you are under 18:

Age _____ School _____ Grade _____

Parent/Guardian/Emergency Contact

Name _____

Telephone _____ Relationship _____

Internship/Volunteer Interests

I am seeking this position:

_____ to become a volunteer.

_____ to satisfy school/class/internship/club service requirement.

School/Organization _____ #of Hours to Complete _____

Contact Name _____ Telephone/Email _____

Availability

Sunday (10-6)	Monday (10-6)	Tuesday (10-6)	Wednesday (10-6)	Thursday (10-8)	Friday (10-6)	Saturday (10-2)

Why do you want to intern/volunteer at the library?

List any previous internships/volunteer experiences.

Describe your skills, abilities, and interest.

Applicant's Signature _____ Date _____

Parental/Guardian Signature (For Applicants under 18)

Printed Name _____ Signature _____

Phone (Day) _____ Phone (Evening) _____

**** PLEASE NOTE: Positions often require repetitive motion such as lifting objects of various weights, standing for extended lengths of time, kneeling, bending, etc.**