

TEEN VOLUNTEER PROGRAM

Purpose: To offer volunteer opportunities for area students, grades 9-12, that promote personal growth and support workforce development.

Express Program

Offered Winter and Spring breaks only

- 2-3 hour shift per day; max. 15 hrs.

Ongoing Program

Offered Winter/Spring and Summer/Fall

- 2-3 hour shift per day;
min. 20 hrs. per semester

Desired Skills for Both Programs:

- Dependability
- Strong customer service
- Good communication
- Ability to work independently

Duties May Include:

- Shelving/shelf reading
- Assisting at public desks
- Assisting with programs
- Cleaning/dusting shelves

The Application Process:

- Applications must be neat, legible, and complete.

In addition, for Ongoing Program:

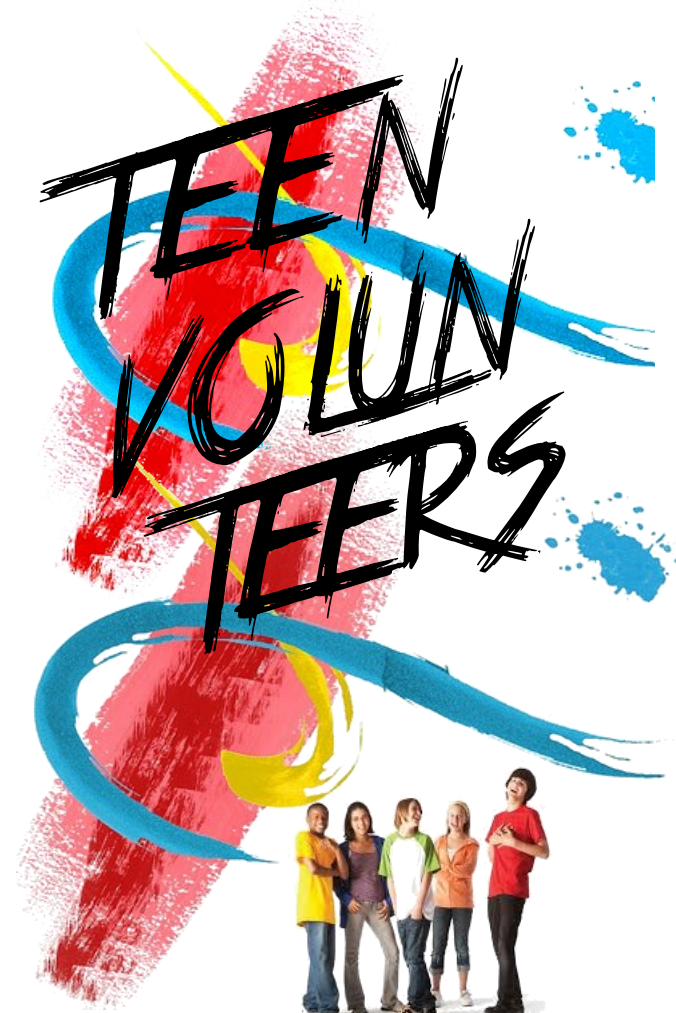
- Applicants will interview with the Volunteer Coordinator.
- Two Letters of Recommendation from instructors must be attached to the application.
- Fingerprinting is required.

WHY COMMUNITY SERVICE WORK IS BENEFICIAL TO TEENS

- Develops sense of social responsibility
- Builds social connectedness
- Improves communication and critical-thinking skills
- Provides an opportunity to apply academic learning to real human needs
- After GPA and SAT, factors into decision-making in college admissions
- Provides topic of interest for college essays
- Helps students find their passion and interests, which may lead to career choices
- Helps develop life-long interpersonal skills

Paso Robles City Library

Suzanne Robitaille
 Volunteer Coordinator
 1000 Spring St.
 Paso Robles, CA 93446
 805.237.3870
 Fax: 805.238.3665
 E-mail: srobitaille@prcity.com



Two programs designed to meet the community service needs of today's high school students

INFORMATION & APPLICATION

Paso Robles City Library Teen Volunteer Application

Please circle the desired program: **Express** (offered Winter and Spring breaks only) or **Ongoing** (offered Jan-May, Aug-Dec)

First Name _____ Last Name _____

Grade _____ School _____

Street Address _____ City _____ Zip _____

Please circle the best way to reach you: home phone cell phone email text

Home Phone _____ Cell Phone _____

Email _____

For Ongoing Program, please attach Letters of Recommendation (must be non-relatives) from two instructors. Also, for Ongoing Program, please indicate day(s)/shift(s) available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning (between 9-12)						
Early Afternoon (between 12-3)						
Mid Afternoon (between 3-6)						
Early evening (between 6-8)						

I hereby acknowledge that as a volunteer for the City of Paso Robles, I am not an employee, but that I am covered under the City's workers' compensation plan since the City has adopted a resolution extending workers' compensation coverage to certain volunteers in specified categories pursuant to Labor Code 3363.5. As a volunteer who is covered under the City's workers' compensation plan, I expressly agree and acknowledge that workers' compensation is my exclusive remedy for any injury suffered while performing said volunteer duties, and that I cannot and will not seek to bring any other claims or actions of any type whatsoever against the City of Paso Robles, its employees, officers, agencies, or other volunteers and officials.

I agree to comply with the City of Paso Robles' rules and regulations to the best of my ability. I agree to respect the confidential nature of information I may obtain, to participate in orientation and training as required by my assignment, and to allow publication of my photo in promotional materials for the City of Paso Robles, including but not limited to, the City website and/or publications.

I do hereby give permission to use my photo, or photos of my child(ren) or of child(ren) I have guardianship of, that appear in activities, for publicity purposes. All photos remain the property of the City of Paso Robles.

Applicant's signature: _____ **Date:** _____

PARENT/LEGAL GUARDIAN SIGNATURE REQUIRED IF PARTICIPANT IS 17 YEARS OF AGE OR YOUNGER: This is to certify that as a Parent or Legal Guardian of the participant, I consent to his/her waiver and release as set forth above.

Parent/Guardian's signature: _____ **Date:** _____

In accordance with the requirements of Title II of the Americans with Disabilities Act of 1990 ("ADA"), the City of Paso Robles will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities. The City of Paso Robles will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcomed in the City of Paso Robles offices, even where pets are generally prohibited. Contact Information: Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of City of Paso Robles, should contact the Community Services Department at the address above. The ADA does not require the City of Paso Robles to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.