

**Beekman Library**  
**Y.E.S. (Youth Empowerment through Service)**  
**Teen Volunteer Application**

Academic Year \_\_\_\_\_

Name \_\_\_\_\_ Phone (home & cell) \_\_\_\_\_

E-Mail \_\_\_\_\_ Address (street & town) \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

**Have you volunteered at the Beekman Library previously? Y/N**

**If yes, please explain when and in what capacity:** \_\_\_\_\_  
\_\_\_\_\_

**Which program(s) are you interested in? Please circle all that apply.**

**Reading Buddy   Homework Helper   General Program Volunteer   Teen Shelver\***

***\*Teen Shelver application can be accessed on [www.beekmanlibrary.org/volunteer-opportunities](http://www.beekmanlibrary.org/volunteer-opportunities) or at the front desk.***

**AVAILABILITY:** Please indicate your available days and times:

Monday: \_\_\_\_\_ Tuesday: \_\_\_\_\_ Wednesday: \_\_\_\_\_  
Thursday: \_\_\_\_\_ Friday: \_\_\_\_\_ Saturday: \_\_\_\_\_

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

**\*\*If you need transportation to participate in this program, you will need to have the parental permission slip completed.**

**PARENTAL PERMISSION FORM**

I give permission for my child \_\_\_\_\_ to volunteer at the Beekman Library, 11 Town Center Blvd, Poughquag, NY. I will provide transportation for my child.

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

Print: \_\_\_\_\_

This program is free of charge. Funded in part by the NYS Office of Children and Family Services & Dutchess County Division of Youth Services.

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**\*Teen Shelves applicants do not need to fill this out. All other applicants must.**

Name: \_\_\_\_\_

Why are you interested in volunteering at Beekman Library? Have you worked with children before?

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What are your interests and hobbies?

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Is there anything else we should know?

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**REFERENCE**

**(To be filled out by a teacher, employer, coach, etc.)**

**\*Teen Shelves applicants do not need a reference.**

\_\_\_\_\_ is applying to volunteer in the Youth Services Department at the Beekman Library. We screen all Youth Services volunteers by asking for written references. Could you please provide a reference?

1. How long have you known this applicant? \_\_\_\_\_

2. Does the applicant have the time, patience, and reliability to work with children?

\_\_\_\_\_  
\_\_\_\_\_

3. What special qualities does this applicant have?

\_\_\_\_\_  
\_\_\_\_\_

4. Is the applicant a risk to children or others?

\_\_\_\_\_  
\_\_\_\_\_

5. Do you have any other comments?

\_\_\_\_\_  
\_\_\_\_\_

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

School / Organization: \_\_\_\_\_

Telephone # & Extension: \_\_\_\_\_

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