Oceanside Public Library Teen Partner Application

Date of Birth:/_	/	□ Virtual Volunte	ering
Which Library woul	d you like to volunteer at:	Civic Center LMission BranclAdelante BoolBookmobile	n Library
In Case of an Eme	rgency, contact (Name):		
Home Phone : (_)Cell Ph	one:()	
☐ Orientation Date	☐ Entered into Volgistics	☐ HR Cleared	Initial



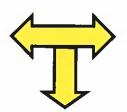
Volunteer at the Library as a Teen Partner



*must be 14 years of age

Earn volunteer hours for school, for fun or work experience

Assist with events and displays, shelve library materials, become a Homework Helper



Create graphics and videos for the Library's social media pages

Serve on the Teen Advisory Board and give input to make the Library an even better place

Civic Center
Amy Kleman, Senior Librarian
(760) 435-5583
akleman@oceansideca.org

Mission Branch
Heidi Garcia
(760) 435-5613 voicemail only
HeGarcia@oceansideca.org

Library Locations

Civic Center Library 330 N. Coast Highway

Mission Branch Library 3861-B Mission Avenue

www.oceansidepubliclibrary.org

*We do not accept court ordered community service.

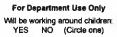
Q.		

VOLUNTEER/INTERN APPLICATION

CITY OF OCEANSIDE

HUMAN RESOURCES DEPARTMENT 300 NORTH COAST HIGHWAY OCEANSIDE, CA 92054 760-435-3500

www.ci.oceanside.ca.us





Name:		11			
Address:	First		Middle	•	00.4
Number and Street	Apt. #	City	State	Žip	
Phone Number: Home ()	Cell/:			Ext	18
Email Address:		П			
Do you have a valid California driver's licer				☐ Yes	□ No
Class Number:	Exp. C)ate			
Are you related to anyone who works for th	•			☐ Yes	□ No
If yes, Name:	Relationship	D:		-	
Department:					
Do you speak/write any languages in addit	ion to English?			☐ Yes	□ No
If yes, please specify the languages:					
Have you ever been convicted of a crime (l	Excluding minor Tra	affic Violations)	?	☐ Yes	□ No
If yes, please explain:					
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AREAS OF INTEREST				
Select one of the following: □ Volunteer □ Intern				
Will the volunteer/intern be driving for the City? ☐ Yes ☐ No If Yes, you must submit the following copies with your application: DMV Printout, Driver's License, Proof of Insurance, and Vehicle Registration.				
Please check the area of City Government you would like to volunteer or intern in:				
☐ City Attorney ☐ City Clerk ☐ City Manager ☐ City Treasurer				
☐ Development Services (☐ Building, ☐ Engineering, ☐ Planning) ☐ Financial Services ☐ Fire				
☐ Human Resource ☐ Information Technology ☐ Library				
☐ Neighborhood Services (☐ Code Enforcement, ☐ Housing, ☐ Parks and Recreation)				
☐ Police (☐ Harbor Police, ☐ Police Explorer, ☐ Senior Volunteer Patrol Program – S.V.P.P.)				
□ Public Works □ Water Utilities				
Please list any physical limitations that need to be accommodated to help you volunteer.				
How did you hear about volunteer opportunities at the City of Oceanside:				
☐ City Employee ☐ Community/Professional Organization:				
□ School Placement/Career Center: □ Other:				
AGREEMENT AND SIGNATURE				
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer or as an intern, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.				
In the event that I am accepted as a volunteer or as an intern for the City of Oceanside, I agree to comply with all its policies, rules and regulations. I fully understand and agree to provide my services to the City of Oceanside as a volunteer or as an intern in a volunteer capacity, and that I will receive no compensation or benefits for services provided.				
SUBMITTING AN APPLICATION DOES NOT GUARANTEE PLACEMENT. If accepted, I will undergo a background check which will include fingerprinting/livescan.				
BY SIGNING BELOW, I AGREE THAT I UNDERSTAND AND CONSENT TO THE ABOVE STATEMENT.				
Print Name:				
Signature: Date:				
If volunteer is under 18, signature of the parent/guardian is required (applicants must be 14 years of age to volunteer).				
Parent/Guardian Signature: Date:				