



Main Library

602 West Park Avenue
Barberton, Ohio 44203-2458

Phone: (330) 745-1194

Fax: (330) 745-8261

Community

Health Library Branch

155 Fifth Street, Northeast
Barberton, Ohio 44203-3398

Phone: (330) 615-3105

www.barbertonlibrary.org

TEEN AFTER-SCHOOL HOMEWORK HELPER APPLICATION

Barberton Public Library is looking for high school students to volunteer as Homework Helpers 2 – 4 scheduled hours a week primarily during the evenings and weekends. Excellent communication skills and an interest in helping the public are a must. Homework Helpers will assist students of multiple grade levels with schoolwork.

This is great experience to include on job, college, or scholarship applications.

Please fill out this application and *submit two letters of recommendation, each from a teacher, including a phone number or official school email where they can be reached.*

Today's Date: _____

Name: _____

Preferred Name (Optional): _____

Preferred Pronouns (Optional): _____

Address: _____

Phone: _____ Email: _____

City & Zip: _____

What grade will you be in as of fall 2022? _____

School attending: _____

What grade level and or subject would you like to help with?

Elementary _____ Middle School _____ High School _____

Please list subjects here



I need volunteer hours for:

Graduation _____ A School Club _____ I just want to _____

Parent's Name: _____

Phone Number: _____

Other guardian: _____

Parental Permission

Dear Parent or Guardian:

By returning this application, your child is applying for an unpaid volunteer position at the Barberton Public Library. Volunteers will be assigned specific duties that are appropriate to their age and abilities, with training provided by paid staff members. It is our hope that in exchange for the gift of your child's time and energy, they will gain valuable workplace experience while learning about job responsibility and fulfillment. If verification of your child's service hours is needed please notify us in advance.

Please sign below if you agree to allow your child to volunteer.

I give permission for my child, _____, to volunteer at the Barberton Public Library.

Parent/Guardian Signature _____

Date _____

If you have questions or would like more information, please call the Library at 330-745-1194 and ask for Teen Services Librarian Sarah Granville or email sarah.granville@barbertonlibrary.org

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