



**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](http://www.barbertonlibrary.org)

## TEEN TECH VOLUNTEER APPLICATION

Barberton Public Library is looking for high school students to volunteer as Technology 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. Teens will be asked to assist Library patrons with basic technology questions such as:

- using cell phones, iPhones and/or Android
- tablets
- e-mail
- the internet
- social media accounts

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

**Please fill out this application and *submit two letters of recommendation*, at least one 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: \_\_\_\_\_

I can help people with (please check all that apply)

iPhones & iPads \_\_\_\_\_ Android Products \_\_\_\_\_

Google Products (Gmail, Drive, etc.) \_\_\_\_\_



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Please list all social media account you can help with.

\_\_\_\_\_

List any other technology question you might be able to help with

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

I need volunteer hours for:

Graduation \_\_\_\_\_ A School Club \_\_\_\_\_ I just want to \_\_\_\_\_

Other (please explain) \_\_\_\_\_

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](mailto:sarah.granville@barbertonlibrary.org)