



## Interview Checklist

Interview Date: \_\_\_\_\_

Time: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

☐ Name: \_\_\_\_\_

☐ Phone Numbers: \_\_\_\_\_

☐ E-mail address: \_\_\_\_\_

☐ Home Address: \_\_\_\_\_

☐ Shirt Size: \_\_\_\_\_

☐ Age: \_\_\_\_\_

☐ Birthday: \_\_\_\_\_

☐ User Id: \_\_\_\_\_

☐ Password: \_\_\_\_\_

☐ Picture

☐ Calendar of Schedule Availability

☐ Deer Teen Volunteer Letter

☐ Parental Waiver for 2016

☐ Friends also interested in volunteering: \_\_\_\_\_

\_\_\_\_\_



# Interview Template

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

Library: \_\_\_\_\_

Interview Date: \_\_\_\_\_ Time: \_\_\_\_\_

Staff: \_\_\_\_\_

Scores: \_\_\_\_\_ Accepted: Yes No

What do you like to do in your free time? (Looking for special skills, interests)

---

---

---

What does your room look like? Do you like friends to visit your room? (*Introversion/Extraversion & Tidiness*)

---

---

---

What ages of people do you like to interact with? \_\_\_\_\_

Describe an interaction with children younger than you:

---

---

---

On a scale of 1 to 10 with 1 being terrible and 10 being wonderful how would you rate the situation  
you just described? 1 2 3 4 5 6 7 8 9 10

Describe an interaction with an adult that you didn't know:

---

---

On a scale of 1 to 10 with 1 being terrible and 10 being wonderful how would you rate the situation  
you just described? 1 2 3 4 5 6 7 8 9 10

Are you comfortable in a library setting approaching adults offering to help them? ☐ Yes ☐ No

How would you do that?

---

---

What would you do if there was no one to help and there wasn't anything assigned to you at your station while volunteering?

---

---

---

What memories do you have at the library?

---

---

---

What do you like to do at the library?

---

---

---



## Volunteer Skills Assessment

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

Library: \_\_\_\_\_

Interview Date: \_\_\_\_\_ Time: \_\_\_\_\_

You will have 5 minutes to complete this page.

**This year reading will be counted in 20 minute sessions. For each of the amounts read below, please indicate the quantity (number) of 20 minute sessions. For example, if one hour was read, that would equal a quantity of 3 20 minute sessions.**

Joe read an hour and a half. He read (quantity) \_\_\_\_\_ of 20 minute sessions.

Susie read 5 minutes. She read (quantity) \_\_\_\_\_ of 20 minute sessions.

Bobby's mom read to him for 40 minutes. Bobby was read to (quantity) \_\_\_\_\_ of 20 minute sessions.

**Please place the following book titles in alphabetical order by numbering them 1—10.**

\_\_\_\_\_ Breaking Dawn

\_\_\_\_\_ Insurgent

\_\_\_\_\_ Allegiant

\_\_\_\_\_ City of Bones

\_\_\_\_\_ Curious George

\_\_\_\_\_ City of Ashes

\_\_\_\_\_ Looking for Alaska

\_\_\_\_\_ Charlotte's Web

\_\_\_\_\_ Green Eggs and Ham

\_\_\_\_\_ Charlie and the Chocolate Factory

*For example:*

3 *Where the Wild*

*Things Are*

1 *Divergent*

2 *Mockingjay*

**Please describe what you would do as a library volunteer in the following situation.**

*A parent approaches the Celebration Station and his child has lost his gift book. The parent and child are both visibly upset. What would you do?*

---

---

---

*You have just finished helping someone reset a password for Summer Reading. Another customer approaches whose password isn't working and asks for help. What would you do?*

---

---

---

# PARENTAL PERMISSION WAIVER

## TEEN LIBRARY VOLUNTEER (17 Years & Younger)

VOLUNTEER NAME, PRINTED: \_\_\_\_\_

DATE: \_\_\_\_\_ LIBRARY LOCATION(S): \_\_\_\_\_

I, \_\_\_\_\_, GIVE PERMISSION FOR MY CHILD  
PARENT / LEGAL GUARDIAN

OR LEGAL CHARGE \_\_\_\_\_, TO VOLUNTEER  
CHILD / LEGAL CHARGE FULL NAME

WITH THE METROPOLITAN LIBRARY SYSTEM.

Photograph(s), audio, or video(s) of my child/legal charge (circle one) may be used by the Metropolitan Library System of Oklahoma County for publicity purposes in newspaper/TV/radio ads, on the MLS website and social media accounts. I understand MLS will identify my child/charge by first name only, and no other information will be released to the media or published in any internal publication without authorization from me.

I understand that by volunteering my child/legal charge will be accessing an internet based program as part of our reading program and may have access to other internet sites.

Parent/Guardian's Name (please print): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please FAX to 405-606-3735, e-mail to [volservices@metrolibrary.org](mailto:volservices@metrolibrary.org) or take to your library supervisor. This must be completed before volunteering.



Dear Metro League Volunteer,

Once hired as a volunteer at this Library, you become an important member of our team. We believe in your abilities, talents, and willingness to learn, and we feel that we can trust you and rely on you to make significant contributions to the library and library programs.

As a team member, you will be asked to assist in program preparation and clean up. For instance, you may prepare, set-up, organize, and take down activity and craft stations. *It is vital that you adhere to your volunteer schedule to ensure that programs are ready for customers to enjoy.*

Also, you may assist during youth programs by actively participating in activities and engaging with customers. For example, you might take part in games, reading, and crafts. It is important that you arrive on time and display enthusiasm and a willingness to help during your entire shift. *Remember, you are a role model for young customers. Kind, courteous, and dutiful volunteers reflect positively on the library.*

Finally, you might be asked to help library customers sign up for Summer Reading, log progress, and claim incentives for reaching reading goals. Therefore, your presence at the sign-up area and celebration station are essential to library efficiency and customer satisfaction. *Your attendance and attentiveness to customers reflect the library's dedication to the community.*

THANK YOU for volunteering and becoming a member of the Library team! Please remember that **helpful and reliable** volunteers are essential to library efficiency and customer happiness.

**Please keep your volunteer schedule in a safe place.**

**VOLUNTEER COPY**





Dear Metro League Volunteer,

Once hired as a volunteer at this Library, you become an important member of our team. We believe in your abilities, talents, and willingness to learn, and we feel that we can trust you and rely on you to make significant contributions to the library and library programs.

As a team member, you will be asked to assist in program preparation and clean up. For instance, you may prepare, set-up, organize, and take down activity and craft stations. *It is vital that you adhere to your volunteer schedule to ensure that programs are ready for customers to enjoy.*

Also, you may assist during youth programs by actively participating in activities and engaging with customers. For example, you might take part in games, reading, and crafts. It is important that you arrive on time and display enthusiasm and a willingness to help during your entire shift. *Remember, you are a role model for young customers. Kind, courteous, and dutiful volunteers reflect positively on the library.*

Finally, you might be asked to help library customers sign up for Summer Reading, log progress, and claim incentives for reaching reading goals. Therefore, your presence at the sign-up area and celebration station are essential to library efficiency and customer satisfaction. *Your attendance and attentiveness to customers reflect the library's dedication to the community.*

THANK YOU for volunteering and becoming a member of the Library team! Please remember that **helpful and reliable** volunteers are essential to library efficiency and customer happiness.

**Please keep your volunteer schedule in a safe place.**

---

**Teen Volunteer Signature**

---

**Parent/Guardian Signature**