

Teen Data Internship Application

Name	Date				
Address					
City	State	_ Zip	Phone		
E-mail address					_
Date of Birth	School		Curre	ent Grade	_
Please give informate This can be a current			orarian, etc., bu	t NOT a family mo	ember.
Name Phone &/or e-mail: How do they know you?					
Number of hours ava	at day/s? lableilable per week				
Please help us get to	know you by answ	ering the fol	llowing questi	ons. (Attach anoth	ner sheet if needed.)
Why are you interested	ed in being the Teen	Data Intern	for the West Cu	uster County Libra	ary District?
Have you ever volun					
If you have a resume	, you may attach it to	the back of	this application	n.	

Thank you for applying!

Please return this application to the West Custer County Library District in person or by scanning/emailing to angela@westcusterlibrary.org