



2020 Teen and Tween Advisory Board Application

Please return application to the Circulation Desk or email to vicki@effinghamlibrary.org.

About the Teen and Tween Advisory Boards:

- Who can join?
 - Public and private school students in grades 6-12
 - Homeschooled students age 12 to 18
- Why join?
 - Help make decisions that affect teens in the library and the community
 - Plan library programs, events, displays, service projects and more
 - Earn community service hours
 - Gain leadership and volunteer experience
 - Learn job skills to add to your resume
 - Make new friends, talk about books, serve the community and have fun!
- What is expected of members?
 - Regular attendance at monthly meetings
 - Be an active participant in the group and be willing to share ideas
 - Act as a library ambassador and positive role model
 - Volunteer at tween/teen library programs

How to Apply:

- Complete the application and return it to the Effingham Public Library Circulation Desk or email to vicki@effinghampubliclibrary.org.
- Applicants will be notified in 1-2 weeks, if invited to become a member

NOTE: Filling out an application does not guarantee acceptance, but your application will be kept on file for one year should openings arise and need to be filled.



PLEASE PRINT NEATLY

Full Name: _____

Preferred Name: _____

Address: _____

Phone #: _____

Email: _____

School: _____

Grade: _____

Preferred method of contact (text, email, phone): _____

How often do you visit Effingham Public Library (circle all that apply):

Every Day Once a Week Every Other Week Once a month Once a Year

During the Summer When I have a homework assignment When I have a group project

I access the library from Home This is my first time in a library



PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____

Phone #: _____

Email: _____

Parent/Guardian Statement: I am aware my teen is applying for membership on the Effingham Public Library's Teen or Tween Advisory Board. I have read and understand the expectations of members and support my tee or tween n in participating in this activity.

Parent/Guardian Signature: _____

Date: _____

Teen/Tween Applicant Statement: I have read and understand the requirements and expectations, and I am willing to be an active member. I understand that I may be removed from the board in the event I fail to meet the expectations.

Teen Applicant Signature: _____

Date: _____



PLEASE ANSWER THE FOLLOWING QUESTIONS

1. Why do you want to join the advisory board?
2. What would you suggest to improve the library's services to teens?
3. What are some of your hobbies and interest? Be sure to include clubs and sports.
4. What are some of your favorite authors, books and series?
5. Do you have any specific talents or skills you think would be useful as a member of the board?



6. What teen or tween programs have you attended in the past?

7. What issues do you think teens in your community face?

8. List ideas for helping teens in your community.

9. What other volunteer experience do you have?

10. What is your favorite class in school and why?



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