

Waverly Public Library Teen Advisory Board Application

(For more information about TAB, email Jon Wolfe: jwolfe@waverly.lib.ia.us)

Please fill out the requested information and return it to the Library.

Name: _____

Address: _____

Phone: _____ *Email Address: _____

Birth date: _____ **Grade: _____

*It is important to provide an active email address as you will be contacted via email regarding involvement in TAB

**Must be enrolled in 7th-12th grade or equivalent

Help us to get to know you by answering the following questions. Use the back or another sheet of paper if necessary.

Have you been a part of TAB in the past? If so, what would you like to see changed about TAB?

Why are you interested in being on the Teen Advisory Board?

Are you willing to attend monthly meetings and provide creative input regarding teen events and collection development at the library?

There are a limited number of positions available and applicants will be chosen based on their ability/willingness to contribute their ideas and attention to improve the community here at the library. This application is only for positions on the Teen Advisory Board and will not affect any teen's ability to attend regular teen events at the library

Please have your parent or guardian sign the following:

"I support my teen's application for a position on the Waverly Public Library's Teen Advisory Board. I also will allow the library to use photos of my teen taken at teen events to be used for promotional purposes for the library, including the library website and Facebook page."

Signature _____ Date: _____

Relationship to applicant: _____