Teen Advisory Board

Burlingame Public Library

Membership: Teens in grade 7-12

Purpose: Suggest, help plan, organize, publicize and be present at programs. Give input regarding services and materials for teens.
TAB members act as ambassadors for the library by getting your friends involved, sharing information about upcoming library events with friends and teachers at school, and bringing back input and suggestions from the community.

What's in it for you? Community service hours! Leadership experience (looks great on job/college apps!)! Have your voice heard! Amazing connection with your Library! New friends! Fun!

Meetings: At least once a month, on the 3rd Friday for one hour. There is a 1 school-year commitment required.

Please fill out the following information and return the application to Kim at the Burlingame Public Library. Acceptance is not guaranteed. It doesn't matter which school you attend – private, public or home school. We want ideas and input from every part of the Burlingame area to help make our teen services the best!

Name _____

Address (Town/City only) _____

Cell Phone _____Home Phone _____
Can you accept texts? (We use the remind.com anonymous text service).

- ❑ Yes
- ❑ No

E-mail _____

School _____

Grade _____ Birthday _____

***Please answer the following questions. Use the back if necessary.**

1.)Tell us why you are interested in serving on the Teen Advisory Group.

2.)What are some of your hobbies and interests?

3.)What is a book you've read recently that you liked (game, music, etc.)?

4.)What kinds of programs/services would you like to see at the Library?

5.)What TAB service goals are you most interested in working on?

- ❏ Programming (events, workshops, etc.)
- ❏ Teen Blog (writing reviews, editorials, etc.)
- ❏ Teen Zine (new! Fall 2016)
- ❏ Themed Displays in Teen Room
- ❏ Collection development (choosing items to purchase for the collection)
- ❏ Leading a workshop for younger kids (coding, crafts, etc. your choice!)

6.)What do you think is the most challenging issue teens face today?

7.)Please list your extracurricular school activities, including days and times.

8.)Do you have any ideas that you would like to see the T.A.B. work on? If so, give us an example.

9.) Is there anything else you'd like us to know as we consider your application?

***Check the following and sign below:**

- ❏ I am aware that being a member of the Teen Advisory Group may require a commitment of several hours a month for meetings and projects chosen by the group.
- ❏ I will volunteer my time as needed and according to my availability.
- ❏ I will commit to one school-year of service to T.A.B.
- ❏ I will always be respectful and considerate of my fellow T.A.B. members and the Library.
- ❏ My service in T.A.B. counts toward volunteer service hours.

Signature of Teen _____

Signature of Parent_____

For more information, please contact *Kim Day at day@plsinfo.org 650.558.7496,*
480 Primrose Rd., Burlingame Public Library

*If you would like to receive volunteer/community service hours, you will need to keep track of your own hours. Please see Kim for more info.