



**Kent Public Library Reading Buddies
Teen Reading Buddies Application
(Teen Volunteers should be ages 14-18)**



Name _____
 Street Address _____
 City _____ Zip Code _____ School _____
 Phone _____ Age _____ Email _____

AVAILABILITY:

Please list all days and times you could be available to give us the greatest chance of matching you with two children per week for an hour at a time (a half- hour session with each child). We will do our best to match you with two children at a time that is convenient for all of you.

Monday, Tuesday, Wednesday (4:00-7:30) Thursday, Friday (4:00-4:30) Saturday (10:30-2:30)

CONTRACT:

As a Reading Buddy, I will:

- Call Kent Public Library (225-8585) **and** my reading buddy if I will **not** be able to attend a session (at least a **half hour** ahead of scheduled time).
- In the case of inclement weather during the winter months, I will phone the library (225-8585) ahead of my scheduled time to make sure the library is open.
- Sign-in for each session.

Signature _____ Date _____

***IMPORTANT:** If you are under 16 years of age, you need to obtain parental permission in order to volunteer in this program. Please make sure that the form on the next page (page 2) is completed by a parent/guardian.

Why are you interested in being a reading buddy? Have you ever tutored before or read with children?

What are your interests and hobbies?

Is there anything else we should know?

PARENTAL PERMISSION FORM:

I give permission for my son/daughter _____ to volunteer at Kent Public Library as a Reading Buddy. I will provide transportation for my son/daughter, and be prompt about picking them up on time. I understand that if my child cannot attend a scheduled session, we need to notify Kent Public Library (225-8585) **and** the Reading Buddy at least a **half-hour** ahead of the scheduled time. In the case of inclement weather during the winter months, I will phone the library ahead of my son/daughter's session to make sure the library is open.

Emergency telephone # _____

Signature of parent/guardian

Date

READING BUDDIES CHARACTER REFERENCE

(to be filled out by a teacher, employer, etc.)

_____ is applying to be a reading buddy volunteer at the Kent Public Library. We screen all volunteers by asking for written character references. Would you please provide a character reference for him/her?

1. How long have you known this applicant? _____

2. Does he/she have the time, patience, and reliability to work with children? _____

3. What special qualities does he/she have?

4. Do you have any other comments regarding the applicant's eligibility?

Signature

Date

Company/Organization

Telephone # & Extension