Returning Big Buddy Interest Form

Students in grades 7-12 may apply.

Reading Buddies: June 11-July 30

APPLICATIONS ARE DUE May 8, 2023

Please print clearly.

TEEN INFO:

Teen's first and last name: _____

Teen's preferred name:_____

Pronouns: _____

School: _____

Age (on first date of program): _____ Grade (Fall 2023): _____

Phone: _____ Email: _____

*We will use this email address for Reading Buddies notifications. We will use your phone number to contact you about attendance.

Street address: _____

City: _____ State/Zip: _____

GUARDIAN INFO:

Parent/Guardian's name: _____

Phone number (in case of emergency) _____

*Email _____

*An adult will be copied on all emails/texts exchanged between a teen and a library employee.

TRAINING

You are not required to attend another training session. However, returning Big Buddies are invited to join us because New Big Buddies always appreciate hearing your valuable ideas and advice. If you will attend, please initial the date below. Training will be held via Zoom. A link to the meeting will be sent prior to training.

_____ Sunday, June 4 from 3:30-4:30 via Zoom

PROGRAM DATES

Please initial the program dates you can attend. If you will not be able to attend a date, DO NOT initial that date. Big Buddies must be able to attend 4 sessions to participate (preferably all).

Day and date	**Time**	**Initial if you can attend**
Sunday, June 11	3:30-4:30	
Sunday, June 18	3:30-4:30	
Sunday, June 25	3:30-4:30	
Sunday, July 2	3:30-4:30	
Sunday, July 9	3:30-4:30	
Sunday, July 16	3:30-4:30	
Sunday, July 23	3:30-4:30	
Sunday, July 30	3:30-4:30	

QUESTIONS

If you participated in the last session of Reading Buddies at the Louisville Public Library, would you like to have the same Reading Buddy you had previously?

_____ Yes _____ No _____ Don't care

Are you interested in becoming an Assistant Coordinator? (Must be in grade 9-11)

_____ Yes _____ No _____ Maybe

VOLUNTEER EXPECTATIONS:

Applicant, please initial the following statements:

_____ I am aware of the dates and requirements of the program. I will arrive on time and contact the Coordinators (louisvillereadingbuddies@gmail.com) in advance if I am unable to attend.

_____ I agree to participate in all aspects of the program with enthusiasm and to the best of my ability. I will be a caring, reliable, and respectful Big Buddy.

_____ I will adhere to the library's volunteer guidelines and will model appropriate behavior in the library.

Signature of parent/guardian: _____ Date: _____

PLACEMENT INFORMATION

Big Buddies are placed on a first-come, first-served basis with returning Big Buddies receiving priority. Program capacity depends partly on how many Big Buddies and Little Buddies apply.

You will be notified about your status in the program by email on or by May 26, 2023.

_____ Check here if you would like to subscribe to notifications about the next session of Reading Buddies and provide the email address here:

Email: _____

_____Suggested: Take a photo of the information below for your records._____

ABOUT US

For questions regarding the Reading Buddies program or attendance, please contact the Reading Buddies Coordinators at louisvillereadingbuddies@gmail.com. The Reading Buddies Coordinators are teen volunteers with prior experience and expertise in running the Reading Buddies program.

For questions regarding forms, applications, and policies, please contact Lindsay Huth, Children's Librarian and volunteer coordinator at childrensreference@louisvilleco.gov.

Return your completed Reading Buddies Interest Form to the Children's desk at the Louisville Public Library (951 Spruce Street, Louisville, CO 80027) by the date listed on the first page.

Applications may also be emailed to childrensreference@louisvilleco.gov.

Incomplete applications cannot be accepted.