



GERMANTOWN COMMUNITY LIBRARY

N112 W16957 Mequon Rd Germantown, WI (262) 253-7760
Hours: Mon-Thurs: 9am - 8pm / Fri: 9am - 5pm / Sat: 9am - 4pm

Teen Advisory Board Application 2024-25

*Please return completed application to the Youth Services desk by October 1st, 2024.

Name: _____

Address: _____

Phone: _____ Email: _____

School: _____ Grade: _____

Best way to reach you? Text msg Phone Email

Why do you want to volunteer with the library?

What projects or causes would you like to see the TAB support?

The Teen Advisory Board meets for 1 hour each month, on the first Monday unless otherwise specified from 6pm-7pm. Can you commit to meeting once a month?

YES NO

Please list some of your other activities and interests.

What changes would make to the Germantown Community Library to better serve teens?

Germantown Community Library Teen Advisory Board Member Contract

Please initial next to each requirement indicating that you have read and agrees to our policies.

I, _____

___ Will be punctual for all programs and meetings, and will give notice to the Library as soon as possible if I am unable to perform my duties.

___ Will show respect to everyone with whom I work.

___ Will complete assigned tasks to the best of my ability.

___ Will make efficient use of my time by seeking out ways in which I may help others after completion of my own responsibilities.

___ Will be enthusiastic about volunteering and conduct myself in a professional manner.

For teens: I certify that all statements in this application are true and complete to the best of my knowledge. I understand that any false statements will subject me to disqualification or dismissal. I have read and initialed each item in the Board member contract and agree to adhere to these policies.

I am aware that being a member of the Teen Advisory Board requires a commitment of a minimum of 1 hour per month, though often more, and that I may continue to be a TAB member at the Library throughout the school year.

Signature: _____ Date: _____

For parent/guardian: As the legal guardian of the participant of the Germantown Community Library Teen Advisory Board, I also adhere to these policies. I understand that my teen is expected to attend all meetings and is responsible for any additional hours for which the agree to work. As their guardian, I agree to ensure that they are able to get to the library when needed.

Signature: _____ Date: _____