

**Kent Public Library
Learning Buddies
Tween/Teen Application
(tween/teen volunteers must
be ages 11-18)**



Name _____

Street Address _____

City _____ Zip Code _____ School _____

Phone _____ Age _____ E-mail _____

Availability:

Please list all days and times you could be available to give us the greatest chance of matching you with one or more Learning Buddies.

Monday, Wednesday (4:00-6:30) Tuesday, Thursday, Friday (4:00-4:30) Saturday (10:30-2:30)

Contract:

As a Learning Buddy, I will:

- Call Kent Public library (845-225-8585) and my learning buddy if I will not be able to attend a session at least one hour ahead of scheduled time.
- In the case of inclement weather during the winter months, I will phone the library (845-225-8585) ahead of my scheduled time to make sure the library is open.
- I will 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 learning buddy? Have you ever tutored before or read with children?

What special interests or hobbies do you have?

Is there anything else we should know?

Parental Permission Form

I give permission for my child, _____, to volunteer at the Kent Public Library as a Learning Buddy. I will provide transportation for my child and be prompt about picking them up on time. I understand that if my child cannot attend a scheduled session, we need to notify the Kent Public Library (845-225-8585) and the Learning Buddy at least **an hour** ahead of the scheduled time. In the case of inclement weather, I will phone the library ahead of my child's session to make sure the library is open.

Emergency telephone # _____

Signature of parent/guardian _____

Date: _____

Learning Buddies
CHARACTER REFERENCE



_____ is applying to be a Learning Buddy volunteer at the Kent Public Library. The Kent Public Library screens all volunteers by asking for a written character reference. Please answer the following to the best of your ability.

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

Organization

Telephone

*Completed applications can be turned in to the library directly, or emailed to Youth Services Librarian, Eric Mahollitz (emahollitz@kentlibrary.org)