



## **Teen Advisory Board Application**

Thank you for your interest in the Teen Advisory Board (TAB).

This group is for students in 9<sup>th</sup> to 12<sup>th</sup> grade who want to make a difference in the library by sharing ideas, planning events, and promoting reading among their peers. Please complete the application below in its fullest to be considered for the 2025-2026 board.

Last day to apply is November 7<sup>th</sup>, 2025.

Applicant Information
Full name:
Grade (Fall 2025):
School:
Phone Number:
Email Address:
Interests & Experience
1. Why are you interested in joining the Teen Advisory Board?
2. What do you enjoy about the library, and how would you like to help improve it for teens
3. Do you have any leadership, club, or volunteer experience? Please describe.

Skills & Contributions		
Which of the following skills	do you bring to TAB?	(Check all that apply)
☐ Event Planning	☐ Public Speaking	☐ Writing/Blogging
☐ Social Media/Marketing	☐ Graphic Design	☐ Other:
Fun Question		
If you could recommend one	e book for every teen	to read, what would it be and why?
<b>Emergency Contact Information</b>	on	
Contact Name:		
Relationship to Applicant:_		
Primary Phone Number:		
Primary Email:		
Parent/Guardian Permission (	Required for applican	ts under 16)
I give permission for my chil Lake Community Library. I u programs designed to suppo	nderstand they will be	_
Parent/Guardian Name:		
Applicant Agreement		
best of my knowledge. I und	lerstand the responsit	this application is accurate to the pilities of being a Teen Advisory attend meetings regularly, and
Applicant Signature:		
Date:		