



Summer 2011 Reading Buddies Volunteer Application
Return to: Avon Public Library PO BOX 977 Avon, CO 81620
Deadline for applications: Thursday, June 2nd

Please **PRINT** clearly!

Your name _____ M _____ F _____

School _____ Age _____ Grade _____

Email _____ DOB _____

Mailing address _____

City _____ Zip _____ Home phone _____

Cell phone _____ Daytime phone for parent _____

Parent name _____ Parent's e-mail _____

Why do you want to be part of Reading Buddies? What are your goals as a Big Buddy?

What are some of your favorite things (books, music, activities, school subjects, etc.)?

Programs at the Avon Public Library:

Wednesdays, June 15-July 27 **4:15-5:15**

Indicate any dates you know you will not be available: _____

Which language would you prefer to use with your Little Buddy?

___ English ___ English and Spanish ___ English and another language (_____)

Reading Buddy applicant interviews will be conducted mid-February .

Please indicate below which day(s) you are available; the RB Coordinator will contact you to set up a specific time for a 15-20 minute interview. A parent will be required to attend the first five minutes of the interview.

_____ Tuesday, May 24th 4-6 pm and training from 6-8 pm.

_____ Monday, June 13th 10-11 am and training from 11-12 noon.

Applicant: please initial the following statements and sign below:

_____ I am aware of the dates and requirements of the program. I will arrive on time and contact the Reading Buddy Coordinator and my Little Buddy in advance if unable to attend a meeting.

_____ I agree to participate in **all** aspects of the program to the best of my ability with enthusiasm and a positive attitude, including reading **the Big Buddy Handbook** before attending the training or meeting with my LB.

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

Parent/guardian, please initial the following statements and sign below:

_____ I am aware of the dates and requirements of the program.

_____ I will encourage my child to be a caring, reliable, resourceful, and creative Big Buddy.

_____ *Initial this Photo Release only if you authorize us to include pictures of your child in RB publicity materials:* I give the Avon Library permission to publish in print, electronic, or video format the likeness or image of my child. I release all claims against the Library with respect to copyright ownership and publication, including any claim for compensation related to the use of the materials.

Signature of volunteer: _____ Date: _____

Signature of parent: _____ Date: _____

