

# CITY OF YORBA LINDA

18181 IMPERIAL HIGHWAY

CALIFORNIA 92886

## YORBA LINDA PUBLIC LIBRARY

### 2017-2018 TEEN ADVISORY BOARD APPLICATION

May 1, 2017

Dear Teen:

The Yorba Linda Public Library invites Yorba Linda teens entering 7<sup>th</sup> through 12<sup>th</sup> grade to apply for the Teen Advisory Board (TAB) volunteering opportunity.

**Purpose:** To help the Yorba Linda Public Library meet the needs and interests of the teen population in the community.

Under close supervision, volunteers in the Teen Advisory Board will offer suggestions and provide input about teen reading interests, recreational activities, programming, and space planning. This will make the library more “teen-friendly.”

There are many benefits to being a part of the Teen Advisory Board, including: meeting and interacting with other teens, developing leadership and teamwork skills, feeling a sense of accomplishment by serving the community, and obtaining recognition to use on high school and college applications. In addition, volunteer hours may be applied towards the high school community service requirement. This is a volunteer position; Teen Advisory Board members will not receive a stipend or any monetary compensation.

Board members are expected to attend monthly meetings as well as half the monthly teen events (usually 4-6 monthly teen events); these events include Anime Night, Movie Nights, Exposed Contest, Film Festival, and Teen Summer Reading Program; these events are usually held Tuesday evenings and various Friday and Saturdays throughout the year. This one-year commitment begins September 2017 and runs through August 2018.

**Completed applications are due Saturday, June 24, 2016, before 4:59 P.M. at the Adult Information Desk. Postmarks will not be accepted. No exceptions.** Selected applicants will be called for an interview. Interviews will be conducted June 28 through July 7, 2017. For more information, please call the Yorba Linda Public Library at (714) 777-2873, ext. 6.

Sincerely,

Amy Côté  
Teen Librarian

# YORBA LINDA PUBLIC LIBRARY

## TEEN ADVISORY BOARD INFORMATION

### Position

Teen Advisory Board (TAB) Member

### Description

The advisory team will help the Yorba Linda Public Library meet the needs and interests of the teen population in the community. The TAB offers suggestions and provides input about teen reading interests, recreational activities, programming, and space planning. Teen events at the Yorba Linda Public Library are offered on a monthly basis. Special events for teens are also offered on an annual basis. One of the main functions of the TAB is to help create, execute and promote these events at their school. TAB members devote numerous personal hours to make teen events possible at the Yorba Linda Public Library.

### Duties

1. Participate and assist in planning and implementing weekly and annual library teen events and services (e.g., Book Discussions, Anime Nights, Exposed Art Contest, Teen Film Festival, Teen Summer Reading Program, etc.).
2. Offer advice and assist in marketing teen events and services to teens in the community.
3. Suggest teen materials for purchase including books, audiobooks, e-books, music and video games.
4. Review Teen Pages web pages/library social media and suggest improvements.
5. Other duties as assigned.

### Qualifications

1. Yorba Linda resident.
2. Entering Grades 7 to 12.
3. Have previous leadership experience.
4. Have current email address that is checked **at least** twice a week.
5. Basic knowledge of locating information on the Web.
6. Enthusiastic about providing ideas for teen programming/services.
7. Willingness to participate on a creative team.

***\*The deadline to turn in TAB Application is Saturday, June 24, 2016 before 4:59 p.m. Postmarks will not be accepted. No exceptions.***

### Commitment

1. One year – September 2017 to August 2018
2. Attend, participate, and assist in the supervision of teen events on Tuesday or Friday evenings from 4 PM to 8:30 PM at least **2-6 times a month**.
3. Participate in monthly meetings.
4. Contribute **8 hours per month** to plan teen services, make recommendations, and assist with general library programs.
5. Respond promptly to TAB email/phone communication.
6. Assist with the Teen Summer Reading Programs.

**VOLUNTEER APPLICATION**  
**YORBA LINDA PUBLIC LIBRARY TEEN ADVISORY BOARD**

**PLEASE PRINT OR TYPE**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

School \_\_\_\_\_ Grade (in Fall) \_\_\_\_\_ Age \_\_\_\_\_

Email address \_\_\_\_\_

What are your hobbies and interests?

Please list sports and other extracurricular activities you are involved in on a regular basis.

What kinds of books do you like to read?

Are there books we don't have that you feel we should add to our collection?

Do you have any leadership experience, or have you ever been a part of a board or committee?  
Explain.

Have you attended any tween or teen events at the library? (Please circle) YES NO  
If yes, what events have you attended?

What do you like most about the library's services for your age group?

Can you suggest any changes or additions to improve the library's services to teens or any additional teen events at the library you would like to see?

The Teen Advisory Board is a resource group for the library in areas such as volunteer support, activity planning and event promotion to peers. How do you think your skills could best be used by the library? Do you have any special skills or talents, such as artistic ability, graphic design, film editing, etc.?

Why would you like to be a part of the Teen Advisory Board?

### **Certificate of Applicant:**

All answers and statements in this application are true and complete to the best of my knowledge. I understand any untruthful or misleading answers are cause for rejection of my application or of my disqualification from the Teen Advisory Board.

Signature \_\_\_\_\_ Date \_\_\_\_\_

As the Legal Guardian of the participant on the Yorba Linda Public Library's Teen Advisory Board, I also adhere to this policy. I hereby agree to indemnify and hold harmless the City of Yorba Linda and its officers, agents, or any third parties injured by the participant or any injury in any way arising out of the participant's activities in this program.

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

**TEEN ADVISORY BOARD  
MEDICAL FORM**

Participant Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Zip \_\_\_\_\_ Grade(in Fall) \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Please note any medical conditions or allergies we should be aware of for your son/daughter's safety: \_\_\_\_\_

\_\_\_\_\_

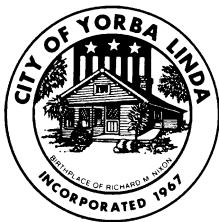
\_\_\_\_\_

**Emergency Contact Information**

Parent's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Other Contact's Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_



# CITY OF YORBA LINDA

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CALIFORNIA 92886

## YORBA LINDA PUBLIC LIBRARY

### AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR

I (We), the undersigned, parents of \_\_\_\_\_,  
do hereby authorize the Yorba Linda Public Library of the City of Yorba Linda as agent(s) for  
the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or  
treatment and hospital care which is deemed advisable by, and is to be rendered under the  
general or special supervision of any physician and surgeon licensed under the provisions of the  
Medicine Practice Act.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or  
hospital care being required, but is given to provide authority and power on the part of our  
aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital  
care which the aforementioned physician in the exercise of his judgment may deem advisable.

By signing this authorization I/we agree to indemnify and hold harmless the City of Yorba Linda  
and all of its officers, employees, agents and volunteers from any and all liabilities for injury to  
persons and/or damage to property arising out of any act or omission in connection with this  
authorization for consent.

This authorization is given pursuant to the provisions of Section 6910 of the California Family  
Code.

This authorization shall remain effective for one year until August 2018, unless sooner revoked  
in writing to the City of Yorba Linda.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Father

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Legal Guardian