Billings Public Library Teen Advisory Group Application

Please return your completed application to the 2nd Floor Help Desk or the TECH Lab.

Date of Application: _____________ Name: ____________________________________________

Address: _________________________________________________________________________

Phone: ___________________________ Grade: ____________ Age: ________________

Email Address: ___________________________________________________________________

Parent/Guardian Name: _____________________ Emergency Contact: ________________

Food Allergies: ___________________________________________________________________

Days and Times of the week you are usually available:

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Please Answer the Following Questions:

1. Why do you want to be a TAG member?

2. What skills or experiences will you bring to TAG?
3. How will you promote teen programs and services at the library?

4. Do you have any special skills such as photography, film, knitting, sewing, music, computer coding, robotics etc. that you can teach to others?

Please check all that interest you: *(Mark the circle next to each special project with which you would be willing to help.)*

- Mentor and/or tutor other teens
- Help the library plan teen programs and TECH Lab workshops for teens
- Volunteer to help at special events and programs for teens, including set up and clean up
- Take advantage of volunteer opportunities such as re-shelving books, wrapping books, and helping out in the Teen Area and/or TECH Lab
- Lead workshops in the TECH Lab
- Lead library tours

Thank you for your interest in the Billings Public Library TAG.

Billings Public Library
510 North Broadway
Billings, MT 59101
(406) 657-8258
www.billings.lib.mt.us