



## MONTPELIER PUBLIC LIBRARY

### TEEN ADVISORY GROUP

The Montpelier Library Teen Advisory Group is open to middle school and high school students and will advise the library on teen issues and concerns, and help the library fulfill their needs and interests.

**WHO:** Students in middle grades who want to make the library a great place for teens!

**WHAT:**

- Promote library services for teens
- Plan events and contests
- Make teens visible players in the library

**WHEN:** Meetings are held **the first Thursday of every month at 5pm**

**WHY:**

- Make a positive difference
- Share ideas with other teens
- Gain leadership skills and community experience
- Socialize with other teens
- Great leadership opportunity
- Great resume builder
- Earn points for attending and earn incentives!

#### **ACTIVITIES TAG PUTS ON:**

- Lemonade Stand during Bean Days!
- Hot Cocoa Fundraiser!
- Locked In The Library!
- More to come!

#### **2022 Meetings**

December 2<sup>nd</sup> (2021)

January 6<sup>th</sup>

February 3<sup>rd</sup>

March 3<sup>rd</sup>

April 7<sup>th</sup>

May 5<sup>th</sup>

... more to come!!

If you or your parents have any questions, Please feel free to contact the library at 419-485-3287 or e-mail Ms. Eliza at: [ezulch@seolibraries.org](mailto:ezulch@seolibraries.org)

**Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Birth date:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_

**Phone(s):**  
\_\_\_\_\_

**Email:**  
\_\_\_\_\_

**School/Grade:**  
\_\_\_\_\_

**Emergency Contact Name & Phone Number:**  
\_\_\_\_\_

**Please answer the following questions; you may attach more paper if necessary:**

1. How has the public library been useful to you?
  
  
  
  
  
  
  
  
  
  
2. What improvements do you feel can be made in library service to teens?

3. What activities are you involved in?

4. What would you like to see the library develop in its services to teens? (Programs, materials, services, etc.)

### **Agreement and Signatures**

#### **Parents**

I consent for my son/daughter \_\_\_\_\_ to join the Teen Advisory Group. I understand that I am responsible for getting my teen to and from the library on the days he/she volunteers or has TAG meetings if they do not drive. I understand that the library is not held responsible in case of an accident.

Parent/Legal Guardian's Name and Phone Number: \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_

\*WOULD YOU LIKE EMAIL OR TEXT REMINDERS OF MEETINGS & EVENTS YOU HAVE SIGNED UP FOR?

IF YES: EMAIL \_\_\_\_\_ OR TEXT # \_\_\_\_\_

Applicant's name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_