Tooele City Library Teen Advisory Council

About the Teen Advisory Council:

The Teen Advisory Council (TAC) is open to students ages 13-18 (7th-12th grade) residing in Tooele City or current library members. The purpose of the TAC is to recognize teens as a great human resource in our community while promoting positive development through soliciting their input and participation in the creation and development of library activities, programs, displays, and services. Meetings are held monthly and TAC members are expected to attend TAC meetings as well as TAC-organized activities on a regular basis. Interviews will be held in June. Accepted applicants will be contacted by June 30th and given further information about the introductory meeting.

Why join the Teen Advisory Council?

- Be a part of the Planning, Advertising, and Implementing of Teen Programs.
- Suggest books, movies, and magazines for the library.
- Gain volunteer experience that looks great on a resume, or college application.
- Make new friends and have fun!

Eligibility criteria for TAC membership include:

- Must join for one school year (August 2022- May 2023) with optional summer volunteer opportunities.
- Required to maintain a 2.0 GPA and have no U's in citizenship
- Attend monthly TAC meetings, complete monthly volunteer hours, and attend weekly Teen Time activities.
- Represent the library with good conduct in and out of the organization.
- Letter of recommendation from a non-family member (i.e. teacher, youth leader, boss, counselor).

Please return this completed application, one letter of recommendation, and 2021-2022 4th term GPA by Tuesday, May 31st 2022 to:

Tooele City Library 128 West Vine Street Tooele, UT 84074

For questions please contact: Kayla or Malissa 435-882-2182

Teen Advisory Council Application

		Applicant Informatio	n	
Full Name:			Date:	
	Last	First	D.O.B	
Address:	Street Address		Ano	rtment/Unit #
	Street Address		<i>Ара</i> і	unenvonii #
	City		State ZIP	Code
Phone:		Email		
Date Availab	le:	School (Fall 2022):	Grade (Fall 2022):	
	، مامال		f access about volumealf	
		s get to know you by sharing a brie		
Tell us a	bout your hobbi	ies, skills, and talents. Tell us about the Teen Advisory Cou	why you would make a grencil.	eat member of
	Tell us about w	yhy you would make a great membe	r of the Teen Advisory Cou	ncil.
You m	ay use an alternate	piece of paper for your essay, if necessary.		

References					
Please list two non-family references.					
Full Name:	Relationship:				
Company:	Phone:				
Address:					
Full Name:	Relationship:				
Company:	Phone:				
Address:					
Parent	/Guardian Contact Information				
Please list your parent/guardian's contact inform					
Full Name:	Polationship:				
Address:	Phone:				
Email:					
Full Name:	Relationship:				
Address:	Phone:				
Email:					
	Release Statement				
Should my application be accepted, I agree to	be bound by the bylaws and policies of the Teen Advisory Council.				
Applicant Signature:	Date:				
Advisory Council at Tooele City Library. As the Library, its representatives and agents, express and/or name in publications produced by or on in other publications of an educational or promomyself, heirs, or survivors to seek recompense	my permission for the above participant to be a member of the Teen parent/guardian/conservator of this volunteer, I hereby grant to Tooele City permission to use the likeness of my child, recorded voice or image, behalf of Tooele City Library, and/or on Tooele City Library's website, and otional nature. In granting permission, I hereby relinquish all rights by for such usage now or at any time. As the parent/guardian of this staff from any responsibility or liability while participating in volunteer				
Signature:	Date:				