Bedford Borough Libraries

Bedford Borough Libraries: Summer Reading Challenge Champion Application/Reference Form

Name:	Mobile Tel No
Address:	Home Tel No
	E-Mail:
Postcode:	Gender: Male / Female
Date of Birth:	Age:
Emergency contact number:	

Please tell us why you are interested in volunteering to help with the Summer Reading Challenge?

What kind of skills/experience do you have that might help you as a Summer Reading Challenge Champion? e.g. Are you creative, or good with computers? Have you got experience of helping children? What other things are you good at?

Please tick which library you would like to volunteer at

	<u>, , , , , , , , , , , , , , , , , , , </u>			
Bedford Library		Kempston Library	Putnoe Library	
Bromham Library		Wootton Library		

Are you planning to use volunteering for the Summer Reading Challenge to help you achieve accreditation towards any youth awards? Yes / No

Award

When would you be able to volunteer? Please tick when you are available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							

Do you have a summer holiday or holidays booked? If so, please list the dates below.

Do you have a disability? Yes / No

Please give details of disability that may impact on your volunteering:

Please give details of any medical conditions we should know about that may affect your volunteering:

If you are under 16 please ask a parent or guardian to sign this form to say that they are happy for you to volunteer with us. If you are over 16, then you can sign the form yourself.

Name	
Address (If different to above)	•
Signature	Date

For Teacher to complete (or Referee who is not related to you eg employer, scout/guide leader etc).

The student listed overleaf is applying to volunteer as a Summer Reading Challenge Champion. The volunteer will help children aged 3 – 12 years enjoy the Summer Reading Challenge. They will talk to children and parents about the Challenge, hand out rewards, take part in library activities and encourage children to read/participate in the Challenge. The volunteers are always supervised by library staff. To ensure that we maintain a safe and secure environment for children, I would be very grateful if you would complete the reference section below. If you would like to discuss this volunteer further, I would welcome you to make contact. Thank you

School:	
Teacher/Role:	
Please state your opinion as to the suitability or otherwise of the stud role.	dent overleaf for this volunteer
Signed:	Date

Please return your completed application form by Friday 5th July 2019 to Janine Lockwood, Bedford Central Library, Harpur Street, Bedford MK40 1PG janine.lockwood@bedford.gov.uk

