



Teen Advisory Board Application

Please fill out the following information and return this form to Brandon Hines, the Young Adult Department Head.

Name: _____

Address: _____

Phone: _____ Email address: _____

School: _____ Grade: _____

What is the best way to contact you? Phone _____ Email _____

What are some of your hobbies, interests, extracurricular activities?

Why are you interested in being on the TAB?

What changes would you suggest that would make the Hays Public Library better for teens?

Have you volunteered or worked in a library before? Yes _____ No _____

I am aware that my teen is applying to the Teen Advisory Board at the Hays Public Library.

Signature of parent/guardian: _____ Date: _____