

Dear Reading Buddy Applicant,

Thank you for your interest in volunteering with the Vaughan Public Libraries Reading Buddies Program. In this package you will find the documents necessary to complete your application.

- Reading Buddies Application Form (attached)
 - Both sides of this form must be completed in full.
- Two Reference Forms (attached)
 - Your references must complete these forms and return them to you in signed, sealed envelopes. Individuals who complete these forms must not be related to you.
- York Regional Police Vulnerable Sector Check Application for volunteers 18+
- Photo permission form (attached) – **optional**

Completed applications must be submitted to the branch at which you would like to volunteer. All documents listed above must be submitted in order for the application to be considered.

Successful applicants will be required to attend an interview and orientation / training session.

If you have any questions about the Reading Buddies Program or the application process, please contact a Youth Services Librarian at your local branch of Vaughan Public Libraries.

Sincerely,

Vaughan Public Libraries
905-653-READ (7323)

VOLUNTEER JOB DESCRIPTION

JOB TITLE: READING BUDDY VOLUNTEER - SUPERVISED

REPORTS TO: Information Staff

SUMMARY

Under the direction of a designated supervisor, provides reading practice to children aged 7-11.

RESPONSIBILITIES

1. Provide reading practice in a supervised group setting.
2. Create an encouraging and positive environment for readers.
3. Identify child's reading interests and help select appropriate reading materials.
4. Use library and computer technologies to support the development of literacy skills as appropriate.
5. Good attendance and punctuality is required.
6. Supports the *Mission, Vision* and *Values* of Vaughan Public Libraries.
7. Responsible following Health & Safety policies and procedures.
8. Record hours worked and tasks accomplished if required for community service placements.
9. Other duties as assigned.

QUALIFICATIONS

- Completed Grade 8.
- Proficiency in English language.
- Ability to read and recite texts proficiently.
- Ability to communicate courteously and effectively.
- Enthusiasm for working with children.
- Patient, dependable and reliable.
- Volunteers 18 years or older must obtain and submit a Police Vulnerable Sector Check prior to participating in the program.

TIME COMMITMENT

- Volunteers must commit to a minimum participation level of 1 hour per week as scheduled for the duration of the program (excluding holidays).

APPLICATION PROCESS

- Volunteers must complete and submit a Reading Buddies application.
- Volunteers must submit two reference letters and successfully complete an interview.

TRAINING

- Volunteers must attend an orientation/training session prior to participating in the program.

BENEFITS

- Volunteers will gain valuable work experience, and develop teamwork and leadership skills.
- Volunteers will earn community service hours for their secondary school diploma.

Please complete all sections of the form

Name: _____

Street Address: _____

City: _____ Postal Code: _____

Home Telephone: _____ Mobile: _____

Email: _____

Date of Birth: _____ Grade/Year: _____ Age: _____

VPL Library Card #: _____

Name of School currently attended (if applicable): _____

- I give Vaughan Public Libraries permission to contact me regarding other volunteer opportunities.
 I give Vaughan Public Libraries permission to contact me regarding teen programs.

If you are not a student:Occupation (if applicable):

Work Telephone (if applicable): _____

Please check the box for your availability:**Reading Buddies @ Bathurst Clark Resource
Library is on:**

- Wednesdays 4:30 – 5:30**
 Wednesdays 5:30 – 6:30

**Reading Buddies @ Pierre Berton Resource
Library is on:**

- Thursdays 4:00 – 5:00**
 Sundays 2:00 – 3:00

Reading Buddies @ Maple Library is on:

- Tuesdays 6:30 – 7:30**
 Wednesdays 6:30 – 7:30

Reading Buddies @ Woodbridge Library is on:

- Wednesdays 6:30 – 7:30**

**New volunteers must attend an orientation session – ask your branch for
more details**

Your completed application must be returned to the library at which you would like to volunteer.

Vaughan Public Libraries endeavours to provide a safe environment for all library users. In keeping with this objective, applicants will be asked to complete a Police Vulnerable Sector Check prior to the commencement of their volunteer work. The fee for the Police Vulnerable Sector Check will not be refunded to Reading Buddy applicants.

Personal information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act, 1990, MFIPPA\Regulation 29. Personal information collected on these forms is used to contact program participants. After the program the forms are destroyed and non-identifying statistical information is retained. Questions regarding the collection of this information should be directed to the Director of Service Delivery. Freedom of Information Requests should be mailed to: Vaughan Public Libraries Administration Offices 900 Clark Avenue W., Thornhill, ON L4J 8C1

Reading Buddy volunteers must be in Grade 9 or above.

We thank all applicants for their interest in the program, however, only those selected for an interview will be contacted.

1. Why are you volunteering to become a Reading Buddy?

2. Outline any experience you have had working with children, or participating in a Reading Program.

3. What qualities do you have that would make you a great Reading Buddy?

4. Why do you think reading is important in a high-tech world?

5. What do you enjoy reading?

6. What is your favourite children's book, and why is it your favourite?

Signature _____

Date: _____

Dear Referee,

Please use this form to provide a written reference for _____
(volunteer's name) who has applied for the Reading Buddies program at Vaughan Public Libraries. The Reading Buddies program pairs volunteers with a child between the ages of 7 and 12. The pair meet once a week at the library for ten weeks to help the child practice their reading. The Library screens all volunteers by asking for written references. Your responses are confidential.

Please complete this form, seal it in an envelope, **sign across the flap of the sealed envelope**, and return it to the applicant. Thank you for your assistance and for taking the time to complete this form.

Referee: _____
Name (please print) Signature

Occupation: _____

Referee's Phone number: (____) _____ Today's Date: _____

How long have you known the applicant? _____

Questions

1. How do you know the applicant?

2. What words would you use to describe this person?

3. Have you had the opportunity to see this person interact with children? If so, describe the experience.

4. Do you think this person will be suitable for the Reading Buddies program? Why or why not?
-
-

5. On a scale of 1-5 (5 being the highest) please indicate how you feel the applicant scores on the following personal characteristics (circle the appropriate number for each characteristic).

Responsibility	1	2	3	4	5
Dependability	1	2	3	4	5
Work Ethic	1	2	3	4	5
Ability to Relate to Children	1	2	3	4	5
Patience	1	2	3	4	5

6. Is there anything else you would like to tell us about this person?
-
-
-

Vaughan Public Libraries may contact you to confirm the information provided. If you have any questions or concerns, please contact Vaughan Public Libraries at (905) 653-READ.

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*Persons **18 years** of age and older*

I _____, hereby give permission for the photograph(s) taken at all Reading Buddy activities throughout the year to be used by Vaughan Public Libraries and/or the media in electronic or print publications, and online communication vehicles, to promote the Libraries' programs and services.

If the photograph is used in a publication, I authorize

- My full name to be used
 I do not authorize my name to be used

Signed _____

*Parental consent is required for photographs of persons **under 18 years** of age*

I, _____ (*name of parent/guardian*) of
(*first & last name of child*) _____, hereby give permission for the photograph(s) taken at all Reading Buddy activities throughout the year to be used by Vaughan Public Libraries and/or the media in electronic or print publications, and online communication vehicles, to promote the Libraries' programs and services.

If the photograph is used in a publication,

- I authorize my son or daughter's full name to be used
 I do not authorize my son or daughter's name to be used

Signed _____