

Why do you want to be a Reading Buddy?

List three things about yourself that will make you a good Reading Buddy.

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

Have you ever worked with children before? If so, tell us about your experience.

Is there anything else you would like to tell us about yourself?

Please check which one of the weekly sessions you would be available for:
(you **must** be available for these sessions every week)

Wednesdays 4:00 – 5:30pm _____

Thursdays 4:00 – 5:30pm _____

Either session would work _____

Training will be held on Wed. Feb. 22nd, 3:30-5:30pm for everyone

List two adult references from the local community who are not your relatives:

Name _____

Daytime Phone Number _____

Relationship _____

Name _____

Daytime Phone Number _____

Relationship _____

Staff Contacts:

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