

# Reading Buddy Program Volunteers WANTED!

As a Reading Buddies Volunteer, you are a role model to a young reader, practicing reading with your buddy and engaging in fun literacy activities. Each session includes buddy reading, as well as literacy-related games. The Reading Buddy Program is six weeks in length. If you are volunteering for the first time you will also be required to attend an orientation session. ***We are currently recruiting for the spring 2019 sessions.***

## Spring 2019 Sessions:

The spring 2019 sessions will run for six weeks. The actual program is one hour per week. You will be expected to arrive 15 minutes prior to the start of each program and stay 15 minutes after the program finishes, to clean up and make sure your buddy is picked up by their parent. This includes your training session. **You must attend all sessions unless you are ill.**

**Fleetwood Library**: Tues. from 4:00-5:00pm from April 9<sup>th</sup> to May 14<sup>th</sup>  
Orientation/Training is Tuesday April 2<sup>nd</sup> from 4 to 5:30pm

**Guildford Library**: Tues. from 3:45-4:45pm from April 16<sup>th</sup> to May 21<sup>st</sup>  
Orientation/Training is Tuesday April 9<sup>th</sup> from 3:30 to 4:30pm

**Newton Library**: Tues. from 4:30-5:30pm from Feb 5<sup>th</sup> to Mar 12<sup>th</sup>  
Orientation/Training is Tuesday January 29<sup>th</sup> from 4:30 to 5:30pm

**Strawberry Hill Library**: Wed. from 3:30-4:30pm from April 3<sup>rd</sup> to May 8<sup>th</sup>  
Orientation/Training is Wednesday March 27<sup>th</sup> from 3:30 to 4:30pm

**Cloverdale Library**: Thurs. from 3:45-4:45pm from Feb 7<sup>th</sup> to Mar 14<sup>th</sup>.  
Orientation/Training is Tuesday Feb 5<sup>th</sup> from 3:45 to 4:45pm

**City Centre Library**: Wed. from 3:45-4:45pm from April 10<sup>th</sup> to May 15<sup>th</sup>  
Orientation/Training is Wednesday April 3<sup>rd</sup> from 3:30 to 4:30pm

**Semiahmoo Library**: Tues. from 3:30-4:30pm from Feb 5<sup>th</sup> to Mar 12<sup>th</sup>  
Orientation/Training is Tuesday January 29<sup>th</sup> from 3:30 to 4:30pm

## Qualifications:

- Enjoy working with children
- Interest and enthusiasm for books and reading
- **14-18** years of age
- Reliable and punctual

## How to Apply- Please read carefully!

If you would like to apply to become a Reading Buddy Volunteer, you must complete an application form, submit two **professional** references (not a school friend or a relative), and agree to an interview with library staff. **Once you have come in and had an interview, and have been accepted into the program**, you must also agree to and pass a Police Information Check (PIC) through the RCMP. PIC forms will be provided by library staff after your interview.

Please return the application and completed references to the Youth Services Librarian at the branch where you are interested in volunteering. Applications will be considered on a first come first served basis. ***When a branch reaches its maximum number, it will stop accepting applications.***

### Training Provided:

Once you have been accepted into the program, you will be contacted about training and orientation. A 60-90 minute training session is provided the week prior to the start of the program. If you do not attend training, **you will not be accepted** into the program.

### Benefits of Volunteering for Surrey Libraries:

- Helping young readers enhance their literacy skills
- Opportunity for direct community involvement
- Reference letter provided to those volunteers who **have completed the six week program**
- Can be used to fulfill graduation requirements
- **Have fun!**

### Time Commitment:

- Six week program – volunteers **must commit to attend and participate in all six weeks or no reference letter will be provided**
- 1.5 hours weekly
- If a volunteer misses a session without notification, his or her spot in the program may be given to someone on the waiting list
- Completion of a program evaluation form, due on the last day of program

### Program Locations:

Fleetwood, Guildford, Newton, Cloverdale, City Centre, Semiahmoo and Strawberry Hill Libraries

### Youth Services Librarians hosting the program:

Please feel free to contact any of the Librarians if you have questions or concerns regarding the program.

<b>Claire Badali</b>	Fleetwood	604-598-7354 604-598-7341 Fax	<a href="mailto:claire.badali@surrey.ca">claire.badali@surrey.ca</a>
<b>Yesenia Ricardo</b>	Guildford	604-598-7378 604-598-7361 Fax	<a href="mailto:yricardo@surrey.ca">yricardo@surrey.ca</a>
<b>Chloe Humphreys</b>	Newton	604-598-7413 604-598-7401 Fax	<a href="mailto:chloe.humphreys@surrey.ca">chloe.humphreys@surrey.ca</a>
<b>Mehjabeen Ali</b>	Strawberry Hill	604-501-5844 604-501-5846 Fax	<a href="mailto:mnali@surrey.ca">mnali@surrey.ca</a>
<b>Krista Harrison</b>	Cloverdale	604-598-7329 604-598-7321 Fax	<a href="mailto:krista.harrison@surrey.ca">krista.harrison@surrey.ca</a>
<b>Erol Olcay</b>	City Centre	604-598-7437 604-598-7421 Fax	<a href="mailto:eolcay@surrey.ca">eolcay@surrey.ca</a>
<b>Ginny Aho</b>	Semiahmoo	604-592-6913 604-502-5751 Fax	<a href="mailto:vpaho@surrey.ca">vpaho@surrey.ca</a>

# READING BUDDIES VOLUNTEER APPLICATION FORM

Blue or black ink must be used to fill in ALL pages of the application form.

Surname: \_\_\_\_\_ First name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Library staff may e-mail me in connection with the Reading Buddies program.

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

What school do you attend? \_\_\_\_\_ Grade: \_\_\_\_\_

Please describe your previous volunteer experience (if any): \_\_\_\_\_

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Do you currently have a City of Surrey Volunteer profile? Yes \_\_\_\_\_ No \_\_\_\_\_

Why would you like to become a reading buddy?

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What skills/qualities do you have that would benefit your work as a reading buddy?

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Languages Spoken: \_\_\_\_\_

In order to provide the best experience for the volunteer, participants and staff, the Volunteer Resources will gather a reasonable amount of information to assist with determining a successful placement. Please provide **two** professional references from individuals who have known you for at least one year and who are **not classmates** or **related** to you.

I acknowledge that the Surrey Public Library is under no obligation to accept me as a volunteer.  
I hereby give the above my consent to verify information with references provided with this application.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Surrey Public Library is authorized to collect personal information under the authority of the *Library Act* and section 26 (c) of the *Freedom of Information and Protection of Privacy Act*. Personal Information is collected for the purposes of Library volunteer recruitment. For questions regarding the collection of personal information, please contact the Manager of Administrative Services, 10350 University Drive, Surrey, BC, V3T 4B8, 604-598-7303.

File No: 2830-20 – Revised 2016 08

**Please return this application and completed references  
to the Youth Services Librarian where you are applying:  
Fleetwood, Guildford, Newton, Strawberry Hill, Cloverdale, City Centre or Semiahmoo Branch**

## **Code of Ethics**

As a volunteer to the City of Surrey, I agree to adhere to this Code of Ethics at all times in my service to the citizens of the City:

### **I pledge to:**

1. Be on time for my volunteer shift, and provide my supervisor with as much notice as possible if I am unable to attend an assigned shift;
2. Abide by all written policies and guidelines provided to me;
3. Accept orientation and training in order to provide quality service;
4. Accept supervision in the performance of my duties;
5. Perform all assigned tasks to the best of my ability, and not report to work while under the influence of alcohol or illegal drugs;
6. Treat with courtesy each individual with whom I come into contact and behave in keeping with the City's Respectful Workplace Policy and Human Rights Policy;
7. Obey all laws and regulations, including traffic laws, while volunteering for the City; and
8. Bring my best skills and abilities to my volunteer work and promote the City of Surrey.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **Confidentiality Agreement**

1. I acknowledge that as a volunteer I may acquire information from the City and/or other parties, about certain City matters which are of a confidential nature and that this information is the exclusive property of the City and is only to be used for the benefit of the City. I also acknowledge that in some circumstances I may be given access to the personal information of others and that the disclosure of this information is not permitted.
2. I acknowledge that the information referred to above could be used to the detriment of the City and its volunteer activities and will treat as confidential all information, contacts and resources which I acquire as a volunteer. I agree not to disclose this information to any third party either during the term I am volunteering for the City or at any time after my term ends unless required by law to do so.
3. I agree that any knowledge gained as a result of my position will remain in strictest confidence.
4. I agree to exercise due care to ensure that any information I may give to others in the course of my duties as a volunteer or otherwise is information that is required to be given and is given to a party entitled to receive the information.
5. I agree I will not discuss the details of my volunteer work with any representatives of the media or publicize any of the confidential aspects of my work verbally or in writing or by any other medium of communication.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



<b>LIBRARY STAFF ONLY</b>
Date: _____
Branch/Location: _____
Event / Occasion: _____
IMG #: _____
Descriptive clothing item: _____

## Photo/Video Release Form

Surrey Libraries has my permission to use quotes / general information / photographs / video acquired in a program / event / interview with me and/or my children today, for use on brochures, posters, annual reports, advertisements, our website/Internet including social media outlets (i.e. Facebook, Twitter) or any other item used by the Library for promotional purposes.

### Adult & Youth (12 and over) or Parent/Guardian Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

### For children under the age 12 (parents must sign on line above):

Childs Name: \_\_\_\_\_ Age: \_\_\_\_\_ girl/boy: (circle one)

Childs Name: \_\_\_\_\_ Age: \_\_\_\_\_ girl/boy: (circle one)

Childs Name: \_\_\_\_\_ Age: \_\_\_\_\_ girl/boy: (circle one)

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# Reading Buddy Applicant Reference Form

## To Accompany the Volunteer's Completed Registration Form

Dear Referee:

Your name has been provided as a personal reference by the individual indicated below. This Prospective Volunteer would like to take on a role within our program working with the community. Information provided by you will be held in confidence and assist in the screening and matching process. If you have questions, please do not hesitate to contact your Youth Services Librarian. Please fill this form in with blue or black ink.

Applicant's Name: \_\_\_\_\_

Referee's Name: \_\_\_\_\_

Referee's Work Address: \_\_\_\_\_

Apt. #

House Number

Street

City

Province

Postal Code

Work Telephone: \_\_\_\_\_ Work Email: \_\_\_\_\_

You are the applicant's:  Teacher  Coach  Supervisor  Other: \_\_\_\_\_

How well do you know the applicant?  A little  Fairly Well  Quite Well  Exceptionally Well

**Please answer the following questions as fully and frankly as possible.**

How long have you known the applicant? \_\_\_\_\_

Do you think this applicant would benefit from volunteering as a reading buddy? Why?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please offer any information that may assist us in determining if this is a compatible volunteer placement for the applicant? (Areas of interest, strength, or opportunities for development).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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Applicant's Name: \_\_\_\_\_

Referee's Name: \_\_\_\_\_

Referee's Work Address: \_\_\_\_\_  
Apt. #                                      House Number                                      Street

\_\_\_\_\_ City                                      Province                                      Postal Code

Work Telephone: \_\_\_\_\_ Work Email: \_\_\_\_\_

You are the applicant's:  Teacher       Coach       Supervisor       Other: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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# Attendance Contract

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## READING BUDDIES PROGRAM SURREY LIBRARIES

### **I pledge to:**

1. Be on time for my volunteer sessions as scheduled, and provide my Program Coordinator, , with as much notice as possible if unable to attend a given session. Contact information for the librarian running the program at each branch can be found on the second page of the application form and will be provided at the orientation where relevant.
2. Accept that should I miss more than 1 session without notifying my Program Coordinator, I may be asked to withdraw from the Reading Buddies Program as a volunteer,
3. Abide by all written policies and guidelines provided to me relevant to my volunteer work,
4. Accept and complete orientation and training in order to provide quality service, and not use contacts made at the Library for business or personal gain,
5. Perform all assigned tasks to the best of my ability, not reporting to work while under the influence of alcohol or drugs,
6. Treat with courtesy each individual with whom I come into contact regardless of race, colour, religion, age, gender, sexual orientation or national ancestry,
7. Bring my best skills and abilities to my volunteer work and promote Surrey Public Library.

**I confirm that I have read the above statements and agree with them and I will therefore adhere to all Attendance Contract requirements contained in this agreement or as may be otherwise directed to me in writing by Surrey Public Library during my term as a Reading Buddies Volunteer.**

Signed at the City of Surrey, British Columbia, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Name of Volunteer (*Please print*)

\_\_\_\_\_  
Signature of Volunteer