



Teen Trustee Application

Thank you for your interest in serving as a non-voting Teen Trustee for the Camden Public Library!

Date: _____

Name(s): _____

Mailing Address: _____

Phone: _____ Email: _____

School Attending: _____

Are you able to attend **most** monthly board meetings on the 3rd Thursday at 4 p.m.?

Yes No

Why are you interested in becoming a Teen Trustee?

Check or describe skills that you'd like to contribute or develop as a Teen Trustee:

- Communication
- Teamwork
- Leadership
- Organization
- Creativity
- Public Speaking
- Other: _____

What do you enjoy about the Camden Public Library?

What ideas do you have for improving services or programs for teens?



Leadership & Experience:

Please list any clubs, volunteer work, leadership roles, or community involvement:

Commitment Statement

Being a Teen Trustee requires active participation, including attending meetings, sharing ideas, and representing teen voices in the community.

Are you willing to commit to this responsibility for a two-year term?

Yes No

Reference

Name: _____

Relationship: _____

Contact Information: _____

Parent/Guardian Permission (if under 18)

I give permission for my child to apply for and serve as a Teen Trustee.

Name: _____

Signature: _____

Date: _____

Applicant Signature

I certify that the information provided is accurate.

Signature: _____

Date: _____

**Return to Camden Public Library, 55 Main St., Camden, ME 04843
or to Executive Director Kristy Kilfoyle at kkilfoyle@librarycamden.org**