



## South Dakota Young Adult Reading Program (YARP)

### Teen Reads Committee Membership Application

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\*Name:

\*School/ Library Name:

Library Address, City:

Telephone (Work):

Home Address, City:

Telephone (Home):

\*Email Address:

SDLA Member:

\*Why are you interested in serving on this committee?

I agree to be an active member of the South Dakota Young Adult Reading Program (YARP) Teen Reads Committee. I will contribute to the process of nominating and selecting books and make every effort to attend both annual meetings.

Members need to read and review a minimum of 7 titles to remain on the committee. If minimum is not met, the member is removed from committee and will need to reapply if interested.

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

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

\*required fields

Revision 9/2016