Owl's Nest Little Owl Application

Sioux Center Public Library

The Sioux Center Public Library invites you to become an Owl's Nest Little Owl. This is a reading partnership program designed for children TK to 4th grade. This program pairs a child with a student or adult volunteer for a one-on-one reading experience. You will be reading together at an agreed upon time in the library at least once a week. If you would like to be part of this program, please fill out both sides of the following application so we can match you with a volunteer.

Contact Information:

Child's Name: _____ male female

Parent/Guardian's Name: _____

Contact Person (if different): _____

Address: _____

Phone: _____

Email: _____

Age: _____ School: _____ Grade: _____

Today's Date: _____

Reading Preferences:

Reading Level:

- ☐ **Emergent** (TK-K)
- ☐ **Easy** (1st-2nd grade)
- ☐ **Junior** (3rd-4th grade)

How would you describe your reading: (Feel free to check with your teacher)

- ☐ I like reading, but it's hard for me.
- ☐ I like reading, but I wish I could understand the story better.
- ☐ I like reading, but I wish I could read the words better.
- ☐ I am not good at reading out loud yet, so I need some practice.
- ☐ I don't like reading yet, but wish I liked it better.

I think I need help with: _____

_____

Interest and Hobbies: _____

_____

_____

Special Concerns

List any special concerns or needs we should know about you (allergies, physical concerns, health concerns, request a male or female buddy, other concerns):

_____

_____

Availability

When are you available to meet with your Owl's Nest volunteer? Please fill in the time

	Mon.	Tue.	Wed.	Thur.	Fri.	Sat.
AM						
PM						

Agreement and Waiver

Please read the following statement and sign below if in agreement:

I agree that (child's name) _____ can participate in the Owl's Nest program. If (child's name) _____ is unable to attend at the scheduled time, I will notify the library staff (712-722-2138) as soon as possible. I agree that if I do not attend the scheduled time with no prior notice for 3 times, the library reserves the right to give my child's spot to the next waiting Little Owl.

I hereby agree to indemnify and hold harmless the library and its officers, agents, employees, advisors, customers, and other volunteers from any liability or claims of loss, costs or expenses, including attorney fees, for personal injuries to me or damage to my property or theft or loss of my property in connection with my child's participation in this program at the library.

Parent/guardian signature: _____ Date: _____

Initials give permission for use of images of your child in any program related media and permission to share portfolios with child's teacher _____

If unable to attend a scheduled time or for other questions, please contact:
Rachel Byars, Children's Programmer
Phone: 712-722-2138 E-mail: owl@siouxcenterlibrary.org

Sioux Center Public Library

Office Use Only

Assigned Volunteer: _____
Address: _____
Phone: _____
Email: _____
Date/Time of First Meeting: _____

Updated 4/20/2026