MOUNTAIN VIEW PUBLIC LIBRARY PROGRAM GUIDELINES

Library programs are free and open to the public and are intended to promote and enhance the collections, services and mission of the Mountain View Public Library, and meet the education, informational and recreational needs of the community.

Program proposals from the public are evaluated by Adult Services staff according to the following criteria:

Programs must:

- Support the needs and interests of the community;
- Complement the Library's collections, services, and goals;
- Suit the Library's physical space;
- Contribute to the Library's overall schedule of events;
- Be free and open to the public;
- Be submitted at least 3 months in advance of the intended presentation date.
- NOT contain commercial advertising or direct solicitation.

Presenters must:

- Submit a program proposal form along with presentation materials to be used for the program;
- Have experience presenting on proposed topic;
- Provide professional references;
- Sign an Assumption of Risk and Release of Liability waiver;
- Provide evidence of liability insurance with programs that involve animals or movement.

The approval of proposals from the public will be based on the criteria mentioned above and subject to availability of space and other resources. Decisions by the Adult Services staff are final.

Questions: LibraryAdultServices@mountainview.gov



MOUNTAIN VIEW PUBLIC LIBRARY PROGRAM PROPOSAL FORM Presenter's Name: **Contact Information: ABOUT THE PRESENTATION Presentation Name: Desired Length of Presentation: Description and Purpose of Presentation: Intended Audience:** Presentation Format (i.e. PowerPoint Lecture, Workshop, Performance, etc.): **Equipment Needs or Other Special Requirements: ABOUT YOU** Are you an author? \square YES \square NO Are you self-published? \square YES \square NO Title(s) of Book(s): How many years of experience do you have presenting on this topic? ☐ Less than 1 \square 1-2 years □ 3-5 years ☐ More than 5 years Have you presented at other libraries or organizations in the past? ☐ YES \square NO If yes, please provide the names and contact information of the 3 most recent places that you've presented: NAME TITLE/ORGANIZATION PHONE **EMAIL** I understand that as a public agency, the Library's mission is to meet the educational, informational, and recreational needs of the community, and therefore presentations that include an endorsement of products and services, or a solicitation of memberships **are prohibited.** I agree □ I do not agree \square I will not collect the personal information of audience members, nor try to solicit my business or services to them. I agree \square I do not agree \square I will provide a copy of my slides/handouts to the Library for review beforehand. I agree \Box I do not agree \Box I agree that I and/or the audience may be photographed or recorded during the presentation and used on the Library's Website and social networking sites. □ agree □ I do not agree \square Signature ___ Date: _ Please sign and send this form along with any slides, handouts, or additional materials to LibraryAdultServices@mountainview.gov

2