



Juvenile Justice Volunteer Application

To be considered for an approved volunteer role at one of the juvenile facilities, you must answer all questions and complete all sections of this application form. (If this is a group completing this application you do not have to fill out the first line, and if you are not a group you do not have to fill out the second and third line.) Thank you for your interest in working with juveniles. Although everyone who applies may not become an approved volunteer, your application will be given every consideration.

Facility Location:

Last Name:	First Name:	Middle Name:	
Group Name:	Number of members in group:	Age of Members: (check one) <input type="radio"/> 21-59 <input type="radio"/> 60+	
Contact person(s) from the group:			
Address (Street number and name):	City:	State:	Zip:
Home Phone:	Work Phone:	Email:	
Driver's License Number and State:	College Major or Occupation:		
Personal Interests (Hobbies, Skills):			
List Social, Civic, Professional, or Fraternal Organizations:			
Why do you wish to volunteer?			
Describe any prior work with adolescents:			
Specify what type of volunteer services you prefer to do in a facility:			
What days and how many hours per week can you give as a volunteer?			
How did you learn about our program?			
Please list past volunteer experience:			

We are interested in your view on juvenile delinquency. Please share your thoughts with us.

Equal Opportunity Information

State Government policy prohibits discrimination based on race, sex, color, creed, national origin, age or disability. Sex, religious preference, or age is a bona fide qualification in some volunteer roles. The information you provide below will in no way affect you as an applicant, but it will serve two purposes: (1) it will help us to see how well our volunteer recruitment efforts reach all segments of the population, and (2) it will assist in matching the prospective volunteer and the volunteer's assignment.

Date of Birth

Sex

Female Male

Ethnic Group

- 1. White (non-Hispanic)
- 2. Black (non-Hispanic)
- 3. Hispanic (Mexican, PR, Cuban, Central or South American, other Spanish Origin)
- 4. Asian (including Pacific Islander)
- 5. American Indian (including Alaskan native)

Other information that would help us to know more about you:

In Case of Emergency Notify:

Name: _____
Address: _____
Phone: _____

List References Below (Complete Addresses – Including Zip Codes):

Name	Address	Home Phone	Business Phone
1.			
2.			
3.			

I certify that I have given true, and complete information on this form to the best of my knowledge. I authorize investigation of all statements made in this application and understand that false information or documentation or failure to disclose relevant information may be grounds for rejection of my application.

Signature

Date