

The Conflict Resolution Center  
Teen Court Program

**Youth Volunteer Application Form**

Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ DOB: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

What school do you attend? \_\_\_\_\_ What grade? \_\_\_\_\_

What types of activities are you involved with in school? \_\_\_\_\_

\_\_\_\_\_

What activities are you involved with outside of school? (Church, community, etc.) \_\_\_\_\_

\_\_\_\_\_

Do you work? \_\_\_\_\_ Where? \_\_\_\_\_

Will your work schedule interfere with your participation as a volunteer? \_\_\_\_\_

How did you hear about Teen Court? \_\_\_\_\_

\_\_\_\_\_

What qualities do you have that would make you a good youth court volunteer? \_\_\_\_\_

\_\_\_\_\_

What do you hope to gain from participating with Teen Court? \_\_\_\_\_

\_\_\_\_\_

What are your educational or career plans after graduation from high school? \_\_\_\_\_

\_\_\_\_\_

Have you ever been found guilty of a crime? \_\_\_\_\_ (Y) \_\_\_\_\_ (N)

If yes, what was the charge? \_\_\_\_\_

Have you every come in contact with or had any experience with any law enforcement agency or court system? If so, please explain: \_\_\_\_\_

Have you ever been a victim of a crime? \_\_\_\_\_ (Y) \_\_\_\_\_ (N)

If so, please explain: \_\_\_\_\_

Please check which role(s) you would like to perform within the Teen Court program?

Bailiff       Court Clerk       Juror       Prosecuting Attorney

Teen Court meets the second and fourth Monday of the month. When are you available to volunteer for youth court (refer to the attached calendar)? \_\_\_\_\_

When are you not available to volunteer (e.g., days of week, times of year) \_\_\_\_\_

**REFERENCES**

Please include one educational and one community reference. The educational reference may be an administrator, a coach, a guidance counselor, a teacher, a school resource officer or a social worker. The community reference should be over twenty-one years of age and should not be a relative.

**Educational reference:**

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**Community reference:**

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**Emergency contact:**

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

I hereby certify the facts set forth in the above application are true and complete to the best of my knowledge.

\_\_\_\_\_  
Youth volunteer signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date