



Application for Community Member

Application Date: _____

PERSONAL INFORMATION

Name: _____ Date of Birth: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Email: _____ Driver's License Number: _____

Employment: _____ Job Title: _____
(If retired, please note previous occupation & employer)

Address: _____

City: _____ Zip: _____ Phone: _____

Educational Background: _____

Professional & Fraternal Affiliations: _____

Community Activities: _____

References (Other than relatives):

Name: _____ Phone: _____ Occupation: _____

Address: _____ City: _____ Zip: _____

Name: _____ Phone: _____ Occupation: _____

Address: _____ City: _____ Zip: _____

Name: _____ Phone: _____ Occupation: _____

Address: _____ City: _____ Zip: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS

(You may use and attach additional pages.)

Which subcommittee are you applying for?

Which category applies to you?

- ☐ Experience in community-based youth services
- ☐ Youth Justice Advocates with expertise in the juvenile justice system.
- ☐ Directly involved in juvenile justice system.

Please describe your qualifications in one of the three areas listed above and discuss what contributions you feel you might make to the subcommunities activities.

Please describe why you want to serve on the Juvenile Justice Coordinating Council Subcommittee:

MEMBERSHIP REQUIREMENTS

Please check the box next to each requirement to acknowledge:

- ☐ Attend scheduled meetings
- ☐ If unable to attend scheduled meetings provide advance notice and send a designee
- ☐ Complete work assignments on time

Print Name

Signature

Date