

**Genesee County Youth Court
Youth Member Application Form**

Name _____ Male ___ Female ___ Age/Grade _____

Date of Birth _____ Parent/Guardian Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email: _____

School attending? _____ School Activities _____

Do you work? _____ If so, where? _____

Work phone number _____ Hours per week _____

How did you hear about/become interested in youth court? _____

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

What do you hope to gain from being in youth court? _____

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

Have you ever been convicted of a crime? _____ Yes _____ No

If yes, what charge? _____

Have you ever come in contact with or had any experience with any law enforcement agency of the court system? _____ Yes _____ No

If so, please explain: _____

Have you ever been the victim of a crime? _____ Yes _____ No

If so, please explain: _____

When are you available to volunteer for youth court? _____

Two sided, turn over >>>

Emergency Contact:

Name _____ Phone _____ Cell _____

Address _____

Relationship to you _____

References

Please include one educational reference and one community reference. The educational reference may either a teacher or an administrator. 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 _____

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

Signature of Youth Volunteer

Date

Signature of Parent/Guardian

Date

Return this form to:

Genesee County Youth Bureau
5130 East Main St
Batavia, NY 14020
Youth.Bureau@geneseeny.gov
Phone: 344-3960
Fax: 345-3063