

<u>Crawford County Teen Court</u>

Youth Volunteer Application Form

Name	Gender	Age	Date of Birth
Street Address			
City	Zip		
Home Phone	Cell	Phone	
Email Address			
What school do you attend?			
What other volunteer activities do you take par	t in?		
How did you become interested in teen court?			
What qualities do you have that would make yo	ou a good Teen Cour	rt volunteer?	
What do you hope to gain from volunteering for	r Teen Court?		
School Activities (sports, clubs, etc.)			
Activities outside of school (church, community,	etc.)		

Have you ever come in contact with or had any experience with law enforcement, or the court system? YES NO (Having had experience with law enforcement or the court system does not mean you will be unable to take part in Teen court. Volunteers will be chosen at the discretion of the Coordinator.)

If you answered yes, please explain			
Have you even been the victim of a crime? YES NO If yes, please explain			
EMERGENCY CONTACT			
Name	Phone		
Address			
VOLUNTEER SIGNATURE			
I certify that the above information is true.	lagree to follow all teen court rules and guidelines. I understand		
that if I do not follow those rules that I may	be removed as a teen court volunteer. understand that will		
be required to attend a minimum of three	e teen court sessions each year and take part in a teen court		
volunteer training.			
Volunteer Signature	Date		
PARENT SIGNATURE			
l,	, parent/guardian of		
Hereby agree to allow him/her to participa	te in the Crawford county Teen Court Program. I hold harmless the		
Crawford County Teen Court Advisory Board	, its coordinator, employees and officers in any service agency or		
individuals, from any and all action, cause of	faction, or any claims whatsoever and going dated this		
day of, 20	·		
Parent name (Please print)			
Parent Signature	Date		

Mail completed form to: Teen Court Coordinator Erica Krachey 220 N Beaumont Rd Prairie du Chien, WI 53821 Erica.Krachey@WIcourts.gov

Questions? Call Erica @ 608-326-1187