

Date of Application: ____/____/____

COMMUNITY YOUTH MAPPING APPLICATION

COMMUNITY YOUTH MAPPERS

Please print carefully and legibly!

Biographical Information

1. Name: _____
First Middle Last
2. Age: _____ Date of Birth: _____
mm/dd/yr
3. Address: _____
4. City: _____ State: _____ Zip: _____
5. Phone: _____
6. Emergency Contact, Name and Phone Number: _____

Education, Training, and License

1. Grade completed as of June, 2017: _____
2. Have you received your G.E.D.? ☐ Yes ☐ No
3. Current High School: _____
4. Will you have transportation from your home to the Lexington Park library? ☐ Yes ☐ No

Employment, Research, Community Service or Volunteer Experience: Please note any relevant experiences that we should know of, whether paid or volunteer. And anything else you would like us to know about you.

References: Please provide the names -- with relationship to you, email addresses and phone numbers -- of **two references**. They may be teachers, family friends or mentors who know you and can speak to how you would contribute to and benefit from the Community Youth Mapping Experience:

1. Name: _____
Phone: _____
E-mail address: _____
Relationship: _____
How long have you known each other: _____?
2. Name: _____
Phone: _____
E-mail address: _____
Relationship: _____
How long have you known each other: _____?

Legal

1. Have you ever been convicted of an offense against the law or forfeited collateral? (You may omit parking violations) ☐ Yes ☐ No

If yes, please explain:

2. Are you currently on Probation? ☐ Yes ☐ No
3. Do you have Community Services Hours that need to be completed? ☐ Yes ☐ No
4. If so, is it court ordered or an educational requirement? ☐ Court ☐ Educational
5. How many hours of Community Services do you need to complete: _____

Note: The above information will NOT exclude you for consideration.

Application can be mailed or hand-delivered to: Tracy Schrock, Tri-County Youth Services Bureau, Jarboe Educational Center, 21161 Lexwood Drive, Suite B, Lexington Park, MD 20653. Fax: 301-866-5996. Email to: info@tcysb.org.