## **DEFY Junior Staff Member Application**

For Official Use Only - Privacy Sensitive
Any misuse or unauthorized disclosure may result in both civil and criminal penalties

Note: Copies of certificates, licenses, and other qualification documentation must be attached to this application.

Personal Information																
Name											Gend	ler ] Male		Female	Age	
Shirt Size:	Mediu	ium Large X-Large						XX-	XX-Large							
Home Addre	ess	_														
Home Phone Work				Phone				Cell Phone				Email Address				
Mother/Guardian				Address								Phone				
Father/Guardian				Address							Phone					
Employer/School							Position/Major									
Employer/School Address								Supervisor/Counselor (Name, Phone)								
Why are you	intere	sted in beco	ming a DE	FY Junior	Staff M	lembe	r?									
Please expla	in you	r past experie	ence work	ing with y	outh:											
	Li	st three adult <sub>l</sub>	people, not	related to	you, wh		erences known y		a minimi	um of 2 y	ears on	a persor	nal basis	<b>5.</b>		
Name			Ac	Address							Phon	Phone				
Scheduled Program Dates (LPC Fill-in)  PHASE II																
TTINGET				INSE II												
<b>Availability</b> Please indicate your availability (a.m., p.m., all day)																
Sun		Mon		Tues		\	Wed		Thu	irs		Fri		!	Sat	

## **DEFY Junior Staff Member Application (CONTINUED)** Are you available for the entire DEFY program year? No Yes Yes No Are you available for an intensive 5 or 8 day Phase I Summer Leadership Camp? Yes No Are you available to meet once a month during the school year to mentor DEFY youth? No Are you CPR qualified? If yes, expiration date: Yes **Criminal History (**N/A for individuals under the age of 18) Have you ever been convicted of a felony? Yes No N/A Have you ever been convicted of a crime involving a child or sexual offense? Yes No N/A Have you ever been arrested or charged with substance abuse felony? Yes N/A No Have your parental/quardian or custodial rights been terminated due to child abuse (sexual, N/A Yes No physical, emotional, psychological)? Are you now or ever have been subject to any court order involving sexual or physical abuse of a Yes No N/A minor, including, but not limited to a domestic order or protection? Have you ever been refused participation in or had your participation with a foster program Yes No N/A terminated for cause? Has your driver's license ever been suspended or revoked? Yes No N/A Are you now or have ever used illegal drugs? Yes No N/A An installation check MUST be done on all individuals. If you answered yes to any criminal history questions OR there are any facts or circumstances involving you and/or your background that would call into question you being entrusted with the care and supervision of children, please provide details on a separate page. Please read the following carefully with your parent or guardian and then sign below: • A false statement on any part of your application will be grounds for rejection of your application, or for removing you as a DEFY mentor after you have been selected. I/We consent to the release of information about me/my child's abilities and fitness for service as a DEFY staff member by employers, law enforcement agencies, and other individuals and organizations to investigators, personnel staffing specialists, and other authorized employees of the participating DEFY agencies. • I/We certify that to the best of our knowledge and belief, all of the above statements are true, correct, complete, and made in good faith. • I/We understand that Public Affairs personnel and other media representatives (radio, television, etc.) may be present during DEFY sponsored activities. I hereby give permission to the DEFY Program, military media, and/or civilian media to copyright, use, release and publish any sound recording, picture, or video image of my child taken during these DEFY sponsored activities for any lawful purpose. • I/We understand that a parent/guardian must either pick up/drop off or arrangements made for child to be picked/dropped off, or state in writing child can sign himself/herself out at the designated times. • I/We have read and/or been given a copy of the "Junior Staff Member Rules of Conduct". I/We have signed the agreement and agree to follow the "Junior Staff Member Rules of Conduct". I/We understand that my continued participation depends on following the rules. PRIVACY ACT STATEMENT This statement is provided in compliance with the provisions of the Privacy Act of 1974 (Public Law 93-579) which requires that Federal agencies must inform individuals who are requested to furnish personal information about themselves as to certain facts regarding the information requested above. 1. Principle Purpose. To screen and select junior volunteer staff for participation in the DEFY program. 2. Disclosure is Voluntary. If the requested information is not provided, screening may not be conducted and the applicant may not be eligible to serve as a junior staff member. I/We certify that the information contained herein is true and accurate. I hereby give permission for the DEFY program to perform any and all reference and background checks deemed necessary to certify my fitness and appropriateness to serve as a junior staff member in the DEFY program.

Date

Parent/Guardian Signature

JSM Signature

Date