

Date: \_\_\_\_\_



## Project PAVE Youth Community Educators Program Volunteer Application

Thank you for your interest in volunteering with us!

Please complete the following information, and either e-mail the completed application to [grrichmond@projectpave.org](mailto:grrichmond@projectpave.org) or deliver it to 4140 Tejon St Denver CO addressed to Gabby Richmond. Please include "YCEP Volunteer" in your subject line.

Project PAVE will not discriminate on the basis of race, age, sex, physical challenges, creed, color, national origin, religious or political affiliation, gender expression or sexual orientation, marriage or military status. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

**Instructions:** Please answer all the questions fully and accurately. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

**Applications must be submitted by Sunday September 16<sup>th</sup> 2018, at midnight.**

Full Legal Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Preferred First Name (if different than above): \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

How would you like us to contact you?  Phone  Text  Email

Are you eligible to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you furnish proof you are eligible to work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have reliable transportation for work related activities? Yes \_\_\_\_\_ No \_\_\_\_\_

Is that reliable transportation an automobile? Yes \_\_\_\_\_ No \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION** (If under the age of 18):

Name(s): \_\_\_\_\_ Relation to you: \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

Please indicate the days and times you expect to be available to volunteer.

Name of High School): \_\_\_\_\_

Year in High School:

\_\_\_ Freshman      \_\_\_ Sophomore      \_\_\_ Junior      \_\_\_ Senior

Are you fluent in any language besides English?    \_\_\_ Yes      \_\_\_ No  
If yes, which language(s)?

\_\_\_\_\_

Do you have past volunteer experience?    \_\_\_ Yes      \_\_\_ No  
If yes, please describe:

Have you ever been convicted of a felony?    \_\_\_ Yes      \_\_\_ No  
If yes, please elaborate.

**References (Personal or Professional):**

*Please note - References will only be contacted if your initial application is successful, at which point the Volunteer Associate will be in communication with you. However, in order to begin your volunteer service a background check and verification of references will have to be completed.*

<b>Name:</b>	<b>Phone:</b>
<b>Email:</b>	<b>Acquaintance:</b>

<b>Name:</b>	<b>Phone:</b>
<b>Email:</b>	<b>Acquaintance:</b>

<b>Name:</b>	<b>Phone:</b>
<b>Email:</b>	<b>Acquaintance:</b>

**Emergency Contact:**

First name	
Last name	
Home phone	
Cell phone	
Email	

**REFLECTION QUESTIONS:**

On separate paper, please answer the following questions. Answers can be typed or handwritten. If handwritten, please print clearly. Limit responses to no more than two pages.

1. Why would you like to be a part of the *Youth Community Educator Program*?
2. Why do you think it's important to educate the community about teen dating violence and healthy relationships?
3. Explain how you would be an asset to this program?
4. What experiences, inside or outside of school, qualify you to be a *Youth Community Educator*?
5. List any your other commitments and schedule throughout the school year:

\*Please feel free to add any additional information that would help the selection committee know you better.

**I understand and agree to ALL of the following:**

- \_\_\_ Volunteering with Project PAVE, Inc. is AT-WILL. I have the right to end my work relationship with PAVE for any reason, with or without advance notice. Project PAVE has the same right.
- \_\_\_ The language used in these guidelines and any verbal statements of management are not intended to contract of employment, either express or implied, or are they a guarantee of employment for a specific duration
- \_\_\_ No representative of Project PAVE, other than the Executive Director, has the authority to enter into an agreement of employment for any specific period and such agreement must be in writing, signed by the Executive Director and myself. We have not entered into such an agreement.
- \_\_\_ I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

Please **sign below** to acknowledge:

I have read, understand, and consent to the above statements.

\_\_\_\_\_  
Applicant Signature \_\_\_\_\_  
Date

If under the age of 18, parent/guardian name and signature:

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date