



Town of Clifton Park Youth Court



One Town Hall Plaza | Clifton Park, New York 12065 | (518) 371-6651 | FAX: (518) 371-1136

Town of Clifton Park Youth Court Application

Check here to become a Member
(Attorney, Judge, Victim Advocate, Clerk, Foreman)

Check here to become a juror.

Please print

Name: _____
(First) (Middle) (Last)

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Age: _____

School: _____ Grade: _____

Home Phone: _____ Cell Phone: _____

Your email address (Print Clearly): _____

Parent/Guardian: _____

Work Number: _____ Cell Phone: _____

Email address: _____

Parent/Guardian: _____

Work Number: _____ Cell Phone: _____

Email address: _____

Why have you chosen to apply to become a member of Youth Court?

How did you hear about the Town of Clifton Park Youth Court?

Continue to other side



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Each prospective member of Youth Court must fulfill the following responsibilities of membership:

- Attend all training sessions
- Attend your assigned Youth Court session
- Prepare for your assigned Youth Court session during the weeks prior to the session

I, _____, hereby make a commitment to the Town of Clifton Park Youth Court to fulfill my 3 obligations stated above.

Do you participate in any clubs, sports, community organizations or do you volunteer for any organization? Yes _____ No _____

If yes, please explain: _____

Will this interfere with your Youth Court obligations? Yes _____ No _____

References:

- Please include a written statement from both an educational and a community reference with this application.
- The educational reference may be either a teacher or an administrator at your school.
- The community reference should be over 21 years of age and should not be a relative.
- References may be mailed to the address below and are also accepted via email and should be sent to youthcourtdirector@cliftonpark.org.
- Please advise your reference you have listed them on this application as Youth Court may contact them for information.

Educational Reference:

Name: _____ Position: _____
 Business Address: _____
 Work Number: _____ Years known: _____
 Email: _____

Community Reference:

Name: _____ Position: _____
 Business Address: _____
 Work Number: _____ Years known: _____
 Email: _____

Signature of Applicant: _____
 Date: _____

Once the application is completed, please email or mail to:

Town of Clifton Park
 Attn: Youth Court
 One Town Hall Plaza
 Clifton Park, NY 12065
youthcourtdirector@cliftonpark.org