YOUTH SUPPLEMENTAL QUESTIONNAIRE

Number Email: Emerg Are yo Are yo	Home Number: Cell er: ency contact name and phone number: u between the age of 14 and 21? Yes or No. (If older, please submit an adult application) u employed? Yes or No. If yes, please provide the following information. School and/or Company Name: Academic Year and/or Job Title: If employed, how many years w/ company:						
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Write							
	and circle the appropriate response to the following questions						
	Are you willing to pass a background check through the National Instant Criminal System (NICS)?						
2.	Are you an elected member of any school or community entity? Yes or No						
If	yes, list organization(s), position(s) held and duration of service:						
1.							
2.							
3. <i>A</i>	Are you willing to commit to a 2-year term as a commissioner? Yes or No						
	Are you willing to attend two 2-hour standing meetings per month? Yes or No						
	s your schedule flexible enough where you can participate in additional meetings and/or						
	ommission work beyond the standing meetings? Yes or No Are you willing to engage and take on tasks/duties as needed, both short and long-term, to further						
	ne Commission's work? Yes or No						
	Do you have reliable and dependable means of transportation? Yes or No						
8. I	How did you learn about Juvenile Justice Commission? What's your understanding of its function?						

9.	How can the Commission benefit from having you as a member?
	(attach additional paper if needed and indicate the question being continued)
10.	What specific skill sets do you possess (i.e. social media management, understanding of juvenile law, etc.
1.	
2.	
3.	
11.	Is there anything else you would like the Commission to know about you?
	(attach additional paper if needed and indicate the question being continued)