



Teen Volunteer Application

Name: _____ Age: _____

Address:

Phone Number:

Email Address:

***Please check your email regularly**

Emergency Contact Info:

(Name/Relationship to Volunteer Phone Number)

What school do you attend? _____

What grade are you in? _____

Are you volunteering for community service hours? Yes No If so, how many hours do you need? _____ By what date ? _____

What days and times are you available?

Thank you for your application! Please return to EJMPD and we will be in touch to arrange future volunteering opportunities.