

Clark County Parks and Recreation Leaders of the Future Program **TEEN LEADER APPLICATION**

Program Objectives: Leaders of the Future is a leadership development program for ages 13-17. The objective of the program is to create and maintain high standards of education, character, citizenship, as well as life-skill development to meet the future leadership needs of the community. Teen Leaders will focus on service to the community, leadership development, job training skills, and social recreation.

Program Expectations:

Eligibility

Teens ages 13-17 may apply to be Teen Leaders. They must not have a history of discipline problems in Clark County programs, and must not have been suspended or expelled from school during the current school year (or previous school year when applying for summer positions). They must be able to be here for 7 of the 11 weeks of summer camp.

Application Process

All applicants must complete, sign, and turn in:

- Teen Leader application
- Individual Volunteer application.

They must then complete an interview with the Community Center's Leader of the Future supervisor. Applicants will be selected based on their written application, interview performance, and availability of open positions in the program.

Schedules

The LOTF program will be using block scheduling this summer. LOTFs can volunteer Monday – Friday, and there are three available blocks a day. Teens can work 1 or 2 consecutive blocks a day:

- 8:00am 12:00pm
- 11:00am 3:00pm
- 2:00pm 6:00pm

- The shifts can be flexible

- NO TEEN CAN WORK MORE THAN 7 HOURS A DAY.
- New teen leaders can work a maximum of 5 blocks (20 hours) per week. Returning teen leaders may work a maximum of 7 blocks (28 hours) per week



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Name:			Pho	Phone:			
Email:			Date	Date of Birth:			
School:		Grad	Grade, Fall 2016:				
Previous Volun	teer/Work Ex	xperience (i.e. c	oach, babysitter	, volunteer):			
Achievements:							
Hobbies:							
Why do you wa	int to be a Te	en Leader?					
Projected Sumn				to volunteer):			
	Day	Monday	Tuesday	Wednesday	Thursday	Friday	
	8am-12pm						
	11am-3pm						

References (Not Family Members)

2pm-6pm

Relationship

Phone Number

I verify by my signature below that all statements made on this application are true and complete to the best of my knowledge. I accept the rules and regulations of the Leaders of the Future Program.

Applicant Signature	Date
Parent/Guardian Signature	Date

Clark County Parks and Recreation Waiver

Parent/Guardian Name:	
Address:	
Daytime Phone:	Emergency Phone:
I,, actin	ng on behalf of myself or my minor child do expressly and
forever waive and release Clark County, Nevada	, Department of Parks and Recreation and all its
representatives, respective officers, employees, of	or agents from any and all liability for personal injuries or
damages sustained, incurred, or arising from par	ticipation in any Parks and Recreation activity.

JAN COLUMN	CL		DIVIDU		F PARKS & RECREATION LUNTEER ION
Date of Application	I				
Name			First		Middle Init
				Apartment	Home Phone
City		State		Zip Code	Work Phone
Volunteer Position	ı Applyi	ng For			
Highest Education I Special Skills/Certi Foreign Languages First Aid? CPR? Driver's License	ficates_ Spoken Y□ Y□		Expirati Expirati	on Date on Date on Date	Sign Language? _//
Hobbies/Interests _					
Reason(s) for Want	ing to Vo	olunteer			
Area(s) of Interest i	n Volunt	eering			
-			-	-	lp you in this position
List any Physical or	Health	Restriction	18		
Have you ever been convictions- they w	i convicte vill not no	ed of any c ecessarily l	rriminal charge bar you from p	? articipation	_ If yes, provide details and list all n
Do you have any cr	iminal cl	arges pen	ding at present	?	If yes, please provide details

I am able to be	gin on	/ /	8	and will be a	available the fo	ollowing	days and time	s:
Sunday	:::::::	am/pm to	:	_am/pm	Thursday	:_	am/pm to	:am/pm
Monday	_:	am/pm to	_:_	am/pm	Friday	_:_	_am/pm to _	:am/pm
Tuesday	:	am/pm to	_::	_am/pm	Saturday	_:_	_am/pm to	:am/pm
Wednesday	:	am/pm to	:	am/pm				
Please list three Name	e persoi	nal or profe Add		l references	s - NOT family	member Phone	5	Relationship
1								
2								
3.								

How did you hear about the Department of Parks & Recreation's Volunteer Program?

I hereby certify that statements made on this application are true and correct to the best of my knowledge. I understand that, by submitting this application, I authorize inquiries to be made concerning my employment, character, and police records for the purpose of determining my suitability as a volunteer.

Applicant's Signature	Date _	/	/
Volunteers who are minors 18 years of age and under must have parental/legal guardian consent prior to volunteer	lng.		
Parent/Legal Guardian Signature	Date	_/	_/