

SCOTS FOR YOUTH TEEN COURT

STUDENT VOLUNTEER APPLICATION FORM

NAME: _____ SEX _____ AGE _____ DOB: _____

MAILING ADDRESS: _____

CITY: _____

TELEPHONE: _____ E-MAIL _____

SCHOOL ATTENDING CURRENTLY: _____ CURRENT GRADE: _____

EXPECTED YEAR OF GRADUATION _____

WHAT QUALITIES DO YOU HAVE THAT WOULD MAKE YOU A GOOD TEEN COURT
VOLUNTEER? _____

HOW DID YOU BECOME INTERESTED IN TEEN COURT? _____

I have read the information listed above about Teen Court and I am allowing my son/daughter to participate as a Teen Court volunteer. I understand that we, as parent (s)/guardian (s) are invited to attend any Teen Court session with our son/daughter. I further understand that all Teen Court volunteers are required to keep cases CONFIDENTIAL.

I grant to the Scots For Youth agency and persons acting for or through them the right to use, reproduce, assign, and or distribute photographs, films, videotapes, and sound recording of my son/daughter or myself for use in materials that they may create.

PARENT/GUARDIAN SIGNATURE (IF UNDER 18 YEARS OLD)

DATE

VOLUNTEER SIGNATURE

DATE

***By my signature, I agree to participate in Teen Court for one year. ***
Applications will be updated annually.

When application is completed return to:

Teen Court Coordinator
Dorothy B. Tyson
Laurinburg, N.C. 28352

SCOTLAND COUNTY TEEN COURT

District 16

RULES FOR TEEN COURT VOLUNTEERS

Participating in Teen Court as a volunteer is an important form of community service because you are helping other students who have violated the law to be held accountable for their actions in a constructive way. It allows the offenders a second chance to have a clean record without a delinquent or criminal conviction. This type of community service benefits the community and also gives the volunteer the chance to develop new skills. In order to be a Teen Court volunteer, you must agree to abide by certain rules. Some of these rules are necessary so that we can continue to hold Teen Court hearings in the Scotland County Courtroom. The rules are also important because they help you do your job as a volunteer in a way that upholds the goals and purposes of Teen Court. As a volunteer, you are a role model, and Teen Court depends upon you accepting this responsibility. Be serious about your role in Teen Court and conduct yourself in a business-like or professional manner.

1. Be neat and clean in your appearance. Shirts should be tucked in and collared shirts are preferred. No crop tops, tank tops, mid-drifts showing or T-shirts, and no shorts. Boys should wear slacks with shirts tucked in. Coat and tie are optional. Girls can wear slacks, pantsuits or dresses. Dress length should be no shorter than two inches above the knee.
2. Hats should not be worn in court, and there should be no eating and drinking. There are vending machines in the lobby during the break.
3. It is important to show respect in court-no talking, socializing or laughing in the courtroom. We want defendants to take the proceedings seriously, so our volunteers must take the proceedings seriously too.
4. Address the Judge with respect as "Your Honor" or "May it please the Court".

I have read and understand all of the above and agree to abide by these rules of conduct and appearance. I understand if I do not abide by these rules, I will not be allowed to participate in Teen Court. By my signature, I agree to show respect for the court by following these rules.

Name

Date

SCOTS FOR YOUTH

TEEN COURT

Oath of Confidentiality

I solemnly swear or affirm that I will not divulge, either by words or signs, any information about actual cases which comes to my knowledge in the course of a Teen Court presentation, and that I will keep secret all said proceedings which may be held in my presence.

Furthermore, I understand that if I break confidentiality by telling anyone else the names of Teen Court defendant or any other specific details of the case which may identify that juvenile, I will no longer be able to serve as a Teen Court participant.

DATE: -----

SIGNATURE: -----



Scots For Youth-Teen Court
P.O. Box 1831 Laurinburg, N.C. 28353
Phone/Fax: (910) 276-5477

RELEASE of LIABILITY

The undersigned Parent/Guardian hereby agrees as follows:

1. I permit my child/ward to be accepted into and fully participate in all aspects of Scots for Youth- Community Service & Restitution.
2. The program been explained to me and I fully understand and support the curriculum, and activities involved in the program.
3. I and my child/ward fully understand and accept the risk inherent in his/her participation in the above program and activities, including the possibility of accidents while traveling in vehicles or injury while participating in community projects or any other activities deemed proper by the Director.
4. I give my permission for the program staff to maintain discipline in the program by imposing appropriate measures upon my child's/ward's participation.

The undersigned Applicant hereby agrees as follows:

1. I agree to fully participate in all aspects of the Scots for Youth.
2. The program has been explained to me and I fully understand and support the program, curriculum, and the activities involved.
3. I fully understand and accept the risk to me from my participation in the above program and activities, including the possibility of accidents while traveling in vehicles or injury while participating in community projects or any other activities deemed proper by the Director.
4. I give my permission for the program staff to conduct inspections and/or searches of my personal property and belongings as determined by the Director. Furthermore, I agree to abide by the "Policies and Procedures" outlined in the Client Manual and consent to disciplinary measures that may be imposed, to include loss of privileges and/or expulsion from the Scots for Youth.

FURTHERMORE, I agree to indemnify and hold harmless and hereby release and forever discharge the State of North Carolina, the Office of Juvenile Justice, Scotland County, the City of Laurinburg and Scots for Youth, their officers, agents, employees, and assigns acting officially or otherwise, from any and all claims, demands, actions, or cause of action, arising out of my child's/ward's participation in the Scots for Youth.

Parent/Guardian

Applicant

Date _____

Scotland County Teen Court (Scots for Youth)

I, as the parent or guardian of _____, hereby give Scots For Youth-Teen Court and its employees, representatives, and authorized media organizations permission to print, photograph, and record my child for use in audio, video, film, or any other electronic, digital and printed media.

a. This is with the understanding that neither Scots For Youth-Teen Court nor its representatives will reproduce said photograph, interview, or likeness for any commercial value or receive monetary gain for use of any reproduction/broadcast of said photograph or likeness. I am also fully aware that I will not receive monetary compensation for my child's participation.

b. I further release and relieve Scots For Youth-Teen Court, its Board of Trustees, employees, and other representatives from any liabilities, known or unknown, arising out of the use of this material.

I certify that I have read the Media Consent and Release Liability statement and fully understand its terms and conditions.

Please Print

Name of child _____ Grade _____

Address _____

City, State, Zip _____

Signature of parent or guardian _____

Date _____ Phone Number _____

Scotland County Teen Court
Physical Address: 303 Atkinson Street Laurinburg, NC 28352
Mailing Address: Post Office Box 1831 Laurinburg, NC 28353
Teen Court Session Address: Court House, 212 Biggs Street, Laurinburg NC 28352