



## VOLUNTEER STAFF APPLICATION

Deadline – April 1, 2023

Staff Dates: Sunday July 16<sup>th</sup>, 2023 through Friday, July 21<sup>st</sup>, 2023

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

Phone (cell): \_\_\_\_\_

### APPLICANT YLF STATUS (Check All that apply):

\_\_\_\_\_ New Staff Applicant

\_\_\_\_\_ YLF Alumni, if checked year attended YLF \_\_\_\_\_

\_\_\_\_\_ Former YLF staff member, if checked year(s) on staff \_\_\_\_\_

### POSITION DESIRED:

(Rank those areas of interest and expertise from 1 to 4, with 1 being your top choice)

Small Group Staff \_\_\_\_\_ Support Staff \_\_\_\_\_

Technology Staff \_\_\_\_\_ Small Group Leader \_\_\_\_\_

### BACKGROUND CHECK INFORMATION

*Background checks are only required for first-time applicants for staff positions of MYLF*

Social Security Number \_\_\_\_\_ Birthdate: \_\_\_\_\_

Any alternate names (maiden names, name changes, etc): \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*The above information will only be used to do a criminal background check as required by Montana State laws pertaining to volunteers who work with minors. By signing below you give the MYLF permission to conduct the background checks as necessary for your participation in the 2020 YLF.*

**EDUCATION HISTORY**

High School: \_\_\_\_\_ Dates: \_\_\_\_\_

Post High School \_\_\_\_\_ Dates: \_\_\_\_\_

Post High School \_\_\_\_\_ Dates: \_\_\_\_\_

**WORK HISTORY**

Employer: \_\_\_\_\_ Dates: \_\_\_\_\_ Position: \_\_\_\_\_

Employer: \_\_\_\_\_ Dates: \_\_\_\_\_ Position: \_\_\_\_\_

**Experience working with individuals with disabilities (include any previous YLF staffs)**

\_\_\_\_\_  
\_\_\_\_\_

**SPECIAL INTEREST, TALENTS AND ABILITIES**

\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES (please list three, include telephone number)**

***\*\*References are only required for first-time applicants for staff positions of MYLF.***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If you will have any accessibility or accommodation needs and/or dietary or health needs during the week, please describe below. \*If you have no accessibility or accommodation requirements please write NONE.**

\_\_\_\_\_  
\_\_\_\_\_

If selected, I will be available for all staff training and other designated/assigned responsibilities as a staff member for the Youth Leadership Forum beginning at 2:00 p.m., Sunday, July 17<sup>th</sup> 2022 through 12:00 p.m. Friday, July 22<sup>nd</sup>, 2022. I also agree to follow all Carroll College resident hall rules and regulations pertaining to my participation in YLF.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_