



**MY** Baltimore City Teen Court  
Youth Volunteer Application

Date of Application \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Telephone #: Home \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

Parent(s) or Guardian(s) \_\_\_\_\_

IN CASE OF EMERGENCY

Contact # 1: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Address (Leave blank if same as above): \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: (Home) \_\_\_\_\_ (Work/Cell) \_\_\_\_\_

Any medical condition or allergies: Yes ( ) No ( )

*If yes, please explain:*

School: \_\_\_\_\_

Grade: \_\_\_\_\_ GPA: \_\_\_\_\_



Please list two (2) references (non-relatives). One reference should be an adult from the school you attend or from an activity in which you are involved.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

1. List below any current and past co-curricular activities (sports, clubs, etc).

_____	_____
_____	_____
_____	_____

2. List below any previous volunteer experiences:

Name of organization or activity:

Volunteer position:

_____	_____
_____	_____
_____	_____

Please answer the following questions:

a) What do you want to gain from becoming a member of the MY Baltimore City Teen Court?

b) What is one asset that you feel you would bring to the MY Baltimore City Teen Court program?



- c) Define in your own words “Positive Peer Influence”, and discuss how you are prepared to serve as a role model in the Teen Court program.

MY Baltimore City Teen Court is tentatively scheduled for Thursday evenings from approximately 4:30 – 7:00 p.m.

Are you available on Thursday evenings? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you available for Saturday training sessions? Yes \_\_\_\_\_ No \_\_\_\_\_

***As a MY Baltimore City Teen Court volunteer, you will be expected to serve in all courtroom roles (Jury, Clerk, and Bailiff) once trained in that position. All volunteers will begin their volunteer experience as a member of the jury.***

The MY Baltimore City Teen Court Code of Conduct (below) is strictly enforced. Please review prior to completing your application. Please do not submit an application if you are not prepared to fully comply with the code of conduct.

**CODE OF CONDUCT:**

**Behavior**

All teens participating in the program are expected to display appropriate behaviors at all times. Participants are expected to be courteous and respectful, maintain an acceptable demeanor and refrain from the use of obscene language or gestures. There is to be no eating, drinking, or gum chewing in the courtroom. Smoking in the building is strictly prohibited. Running in the hallways, or wandering through the building is not permitted. During proceedings, participants are expected to pay attention, refrain from private conversations and avoid making loud noise. Deviation from the expected norms of the program will not be tolerated and repeated infractions will result in dismissal from the program.

**Dress**

All participants are expected to be appropriately attired. Males should wear pants and collared shirts or sweaters. Females should wear pants or skirts with blouses or sweaters. Shoes and socks are required and good grooming and hygiene is expected.

**Protocol**

Participants should arrive between 4:30-5:00 p.m. and sign in with a MY Teen Court staff member. Participants will follow the directions of the staff and use good judgment in determining acceptable behavior. While in court proceedings, participants will address others by their appropriate title and surname, for example, Billy Smith is to be addressed as “Mr. Smith” not “Robert”. Always address the judge as “Your Honor”. Once the hearing has begun, do not leave the courtroom. There will be no talking or laughing during hearings. You should not display feelings through facial expressions, nodding or shaking of heads, or other conduct that might indicate personal feelings or opinions about what is happening during the proceedings. Finally, all questions and concerns should be directed to an adult in the courtroom or a staff member.



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***I affirm that the above information provided is true and correct.***

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

My child and I have discussed the MY Baltimore City Teen Court. I support his/her application to participate as a MY Baltimore City Teen Court Volunteer. I understand that acceptance into the program is contingent upon acceptance by a staff member and continued enrollment will be based upon his/her behavior.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return to:  
Sonia Dowuona, Program Coordinator, Baltimore City Initiatives  
Maryland Youth and the Law  
520 West Fayette Street  
Baltimore, MD 21201  
Phone: 667-210-2519 Fax: 410-706-5576  
sonia@mylaw.org