

Bastrop Teen Court Attorney/Juror Application

Name _____ Grade _____ Date of Birth _____

E-mail Address _____

Home Address _____

Home Phone _____ Cell phone _____

Mother's Name and Phone number _____

Father's Name and Phone number _____

List ALL extracurricular activities (school, church,) in which you are involved and the number of hours spent per week on each.

Name of organization or activity

Hours per week

What school do you attend? _____

Why do you want to be a part of Teen Court? _____

Have you ever participated in Teen Court before? If so, when and in what capacity?

Do you have a current valid driver's license? Yes _____ No _____

Do you have reliable transportation? Yes _____ No _____

If the answer to either of the above is no, you must attach a statement from your parent (s) that they agree to provide transportation to insure your participation and promptness at all sessions.

I understand that Teen Court takes preparation and dedication. I will be provided scheduled court dates at the beginning of the school year and will speak with my parent(s) and teachers about time commitment and realize how important it is to be present at all court sessions. I also understand I will have to stay for the entire session, even if the case I am involved in is heard first. I also give permission for my photo to be taken while acting as a Teen Attorney/ Juror.

Applicant's Signature

Date

Applicant's Signature

Date