

JUDICIAL CITIZEN REVIEW PANEL APPLICATION MUSCOGEE COUNTY JUVENILE COURT

Name _____

Address _____

City _____ County _____ Zip _____

Mailing Address (if different) _____

e-mail address: _____

Phone: Home _____ Work _____ Ext. _____

Occupation _____

Employer _____ County _____

Social Security #(optional) _____ Sex _____ Birthday _____

Spouse's Name _____ Occupation _____

How did you hear about the Judicial Citizen Review Program?

List any panel members you know:

Why do you wish to become a panel member?

Check if you have any training or experience (practical, volunteer, paid) in any of the following categories. **NOTE:** None is required to be a panel member.

<input type="checkbox"/> Child Care	<input type="checkbox"/> Mental Health	<input type="checkbox"/> News Media
<input type="checkbox"/> Child Development	<input type="checkbox"/> Counseling/Psychology	<input type="checkbox"/> Writing/Editing
<input type="checkbox"/> Child Welfare	<input type="checkbox"/> Medicine	<input type="checkbox"/> Public Speaking
<input type="checkbox"/> Social Work	<input type="checkbox"/> Education	<input type="checkbox"/> Arts or Graphics
<input type="checkbox"/> Personnel	<input type="checkbox"/> Law	<input type="checkbox"/> Fund Raising
<input type="checkbox"/> Criminology or	<input type="checkbox"/> Drug/Alcohol	<input type="checkbox"/> Advertising/
Law Enforcement	Treatment Programs	Public Relations

If yes, please describe: _____

Please describe any other volunteer and community activities:

List Hobbies, Special Interests/Skills:

Have you ever been or are you currently a foster parent?_____ If yes, where?_____

List any arrests, other than traffic citations, and give the charge, date, county/state, disposition:

When can you attend citizen panel reviews at the Juvenile Court?

Please check times available:

	Mon.	Tues.	Wed.	Thurs.	Fri.
Morning (9AM-Noon)					
Afternoon (1PM-5PM)					

Are there specific weekdays when you cannot attend?_____

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I understand that the information requested will be used only for the purpose of determining my suitability as a Judicial Citizen Review Panel Member. I understand that this application does not ensure appointment to a review panel. After the successful completion of my training, I further understand that I will be expected to serve a minimum of one year in the Judicial Citizen Panel Review Program, and that I may be reappointed if I wish to remain active for a longer period of time. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit a written resignation to the program coordinator with as much advance notice as possible.

I am aware that I will be examining sensitive, confidential documents, reports, and other materials in my capacity as a Judicial Citizen Review Panel volunteer. I will discuss these matters only with those persons directly involved in the case at the Court or those who will be consulted for their professional knowledge and expertise.

Signature

Date