



COMMUNITY PAL APPLICATION

2022-2023

Applicant Information

Last Name

First Name Middle Name

Date of Birth Age

Cell Phone

Ethnicity (for statistical use only):

African American Asian Caucasian Hispanic/Latino Multiethnic Native American Pacific Islander Other _____

Home Address

City, State & Zip Code

Primary Email

School Email

Freshman Sophomore Junior Senior

School Attending

Shirt Size: Small Medium Large X-Large

School ID Expected Grad Year

Please attach a copy of your unofficial high school transcript

Please attach a 4 x 6 photo of yourself that meet the following qualities

You're the only one in the picture

It's a head-and-shoulders view, with the entire face, both eyes, and hair clearly visible

You're in focus

There are no dark spots or shadows

Applicant Health Information

No Medical Concerns

Activity Restrictions Please Specify:

ADD/ADHD

Allergies To what? Hives/Rash Difficulty Breathing Epi-Pen Benadryl

Asthma Requires medication/inhaler? Yes No Daily As Needed With Exercise

Communicable Diseases Please Specify:

Diabetes Type I Type II

Medications: Oral Injection Pump Independent in diabetes Self Care Needs Daily Assistance

Diet Restrictions Please Specify:

Heart Disorders Diagnosis: Other restrictions:

Seizure Disorder Date of Last Seizure: Seizure Type:

Assistive Devices Corrective Shoes/Brace Crutches Wheelchair/Scooter Glasses Hearing Aids

Other conditions, disabilities, or medications _____

Schedule Information

Community pals are required to attend a meeting before special events along with leadership trainings and workshops. The time commitment is approximately 5 hours a month for community service events and preparation, not including workshops and trainings. Community pal members must stay on-site for the duration of meetings and events unless otherwise approved by a parent/guardian or adult council advisor.

As of now, do you foresee a reason preventing you from attending any of the meetings or events? Yes No

If you answered "yes", please explain: _____

What academic/extracurricular obligations do you participate in? Please include extracurricular schedule: _____

Parent/Guardian Information (Primary Contact)

Emergency Contact Information (different from Primary Contact)

Community Pal Acknowledgement

I am aware that the position of a community pal is an unpaid leadership position, and skill development training and workshops do not count as community service hours (unless otherwise stated). I understand that this position involves fundamental aspects of group facilitation, experiential learning, public speaking, fundraising and event planning. If selected as a community pal, I will support the Santa Barbara Police Activities League (SBPAL) and Youth Leadership Council's (YLC) mission while carrying out the responsibilities assigned to me.

I also understand membership is a privilege that provides students with skills and experiences for a lifetime. I will be expected to adhere to a high standard of ethical conduct, both in and out of the council, and be willing to adhere to SBPAL's strict personal conduct policy.

Applicant Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

Applicant Short Answers

Answer the following four questions in the space below.

1) Tell us about yourself! What are some of your hobbies/interests? How would your friends and family describe you? How are you involved in your school/community? What obstacle(s) have you had to overcome and how did you accomplish that?

2) Program Interest. Why do you want to be a community pal and what can you contribute to our community?

3) Youth Leadership. How do you define youth leadership and why is it important to you? What leadership traits do you have? What leadership traits do you need/want to develop and why? Would you be interested in participating in our Youth Leadership Council next season?
