



The National Conference for Community
and Justice of the Piedmont Triad, Inc.
713 North Greene Street
Greensboro, NC 27401

Advisor Application for NCCJ ANYTOWN Summer Programs 2010

Please rank the session(s) you can attend in order of your preference; 1st, 2nd. (Remember you must attend the **full week**)

- ___ Session I: July 25-July 30 (arrive July 24th for on-site staff training)
- ___ Session II: August 1- August 6 (arrive July 31st for on-site staff training)
- ___ I can attend either session.

Please type or print legibly.

Name _____

Address (where you want your mail to go) _____ City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____ Date of Birth _____/_____/_____

Primary email address _____ T-shirt Size _____

To ensure diversity at ANYTOWN, we ask that you please check any / all of the following that apply to you: *(This information is confidential and will be viewed by NCCJ staff only. It will not be used or disclosed for any other purposes.)*

Profession and Employer: _____

Sex F ___ M ___

1) *Racial / Ethnic Identity & Heritage:*

- American Indian / Native American
- Asian / Asian American
- Bi-Racial / Multi-Racial (please specify) _____
- Black / African American
- Jewish
- Latino (a) / Hispanic / Chicano (a)
- Middle Eastern
- Pacific Islander
- South Asian
- White / Caucasian / European American
- Other (please specify) _____

2) *Religious Affiliation*

- | | | |
|------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Agnostic | <input type="checkbox"/> Hinduism | <input type="checkbox"/> Spiritualism |
| <input type="checkbox"/> Atheism | <input type="checkbox"/> Islam | <input type="checkbox"/> Taoism |
| <input type="checkbox"/> Baha'i | <input type="checkbox"/> Judaism | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Buddhism | <input type="checkbox"/> Native American | _____ |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Nonreligious Secular | |
| Denomination: _____ | <input type="checkbox"/> Sikhism | |

Name of Church/House of Worship (if any) _____

Certifications: (Please specify and include expiration date)

Counseling / Therapy _____ First Aid / CPR _____

Other _____

Please list any skills that you can share at ANYTOWN (feel free to attach additional information)

- | | | |
|--|--|---|
| <input type="checkbox"/> Art | <input type="checkbox"/> Sports (specify) _____ | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Campfire Set-up | _____ | <input type="checkbox"/> Languages Spoken _____ |
| <input type="checkbox"/> Music / Performing Arts (specify) _____ | _____ | <input type="checkbox"/> Other (specify) _____ |
| _____ | <input type="checkbox"/> Musical Instrument(specify) _____ | _____ |
| _____ | <input type="checkbox"/> Organizational Ability | _____ |
| <input type="checkbox"/> Hiking | <input type="checkbox"/> Photography | _____ |

COMITTMENT:

I understand that if chosen as staff for ANYTOWN 2010, I must attend staff training as well as **ALL** days of ANYTOWN. **All training days are mandatory.** If you cannot commit to the training days please do not submit your application. Training sessions are to ensure that ANYTOWN will be the best ANYTOWN for the 2010 delegates, and without adequate training we are unable to provide that experience.

Thursday Evening, July 8
Saturday, Day, July 10 (9:30-3:30)
Session I— Leave for BRCC Saturday July 24
 Or
Session II— Leave for BRCC Saturday July 31

Disclosure: NCCJ runs criminal background checks on any person who applies as a volunteer for our programs. By signing below, you consent to any such criminal background check(s) NCCJ requires.

Applicant Signature: _____ DATE: _____

Social Security Number: _____

Character Reference: Please give the name, address and phone number of at least **one** individual (not a relative) who has known you for one year or more.

Name _____ Phone number _____

Address _____

Name _____ Phone number _____

Address _____

All ANYTOWN Advisor applicants will be contacted to schedule an interview with a member of the NCCJ Program Staff.

MAIL, FAX OR DROP OFF YOUR APPLICATION TO:

NCCJ ANYTOWN Advisor Application

NCCJ of the Piedmont Triad, Inc.

713 North Greene Street

Greensboro, NC 27401

Fax: (336)272-1814

Contact Person:

Brandi Nicole Johnson, NCCJ Program Associate

Phone: (336) 272-0359

Email: bjohnson@nccjtriad.org

Applications are due in the NCCJ office by 5:00 pm on March 31, 2010.