

# CES Youth Programs

Especially for Youth Volunteer Counselor (Nonpaid) Application

Hawaii Area Program 2009

June 29–July 4

## QUALIFICATIONS

**Female:**

20 years old

**Male:**

Returned Missionary—21+ years old

Fun and Enthusiastic Personality

Testimony of the Restored Gospel

Able to Motivate and Teach Youth

Willing to Receive Feedback

Active in Ward / Stake Institute

Patient and Empathetic

Temple Eligible

## APPLICANT INFORMATION

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Preferred Name \_\_\_\_\_ E-mail Address \_\_\_\_\_ Age \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

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

Male  Female  Married  Single  I am a returning counselor Yes  No  I served a full-time mission Yes  No

## ECCLESIASTICAL INFORMATION

Current Ward \_\_\_\_\_

Bishop's Name \_\_\_\_\_

Telephone #: Home ( ) \_\_\_\_\_ Daytime ( ) \_\_\_\_\_

Bishop's E-mail Address \_\_\_\_\_

Current Stake \_\_\_\_\_

Stake President's Name \_\_\_\_\_

Telephone #: Home ( ) \_\_\_\_\_ Daytime ( ) \_\_\_\_\_

### Instructions:

1. Fill in the information requested above. Then print your completed form.
2. Read the following statement and sign below, giving us permission to contact your ecclesiastical leader.
3. Interview with your bishop / branch president for his endorsement.
4. BISHOP faxes (preferred) or mails completed form to:

CES Youth Programs  
Area Programs VOLUNTEER Counselor Application  
164 Harman Continuing Education Building, BYU  
Provo, UT 84602  
Fax: 1-801-422-0731  
Phone: 1-801-422-3817, ext. 0

To the best of my knowledge, the information included in this application is accurate. I agree to model the highest standards of dress and grooming as found in the *For the Strength of Youth* booklet. CES Youth Programs has my permission to contact my ecclesiastical leader, and I request that my ecclesiastical leader provide information concerning my eligibility to volunteer as a counselor at EFY. I waive my privilege to the information, and I release from any liability all persons supplying or receiving information pursuant to this request.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## ECCLESIASTICAL ENDORSEMENT (BISHOP'S ENDORSEMENT)

The role of an Especially for Youth counselor is one of example and teaching. During the week a counselor is assigned a group of 10 to 15 youth for which they are responsible. As you consider this person, keep in mind he or she will be acting as a teacher, mentor, disciplinarian, friend, and example of gospel standards. This should not be looked at as an opportunity for a young adult who is struggling to be strengthened, as his or her key role is to strengthen the youth by example and edifying teaching. **I have interviewed this applicant and give my endorsement regarding his or her eligibility to volunteer as an EFY counselor.**

Bishop's Printed Name \_\_\_\_\_

Bishop's Signature \_\_\_\_\_ Date \_\_\_\_\_