

SARA DOMB YOUTH DEPARTMENT

83-10 188TH STREET
JAMAICA ESTATES, NY 11432

WEB WWW.YIJE.ORG

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YOUNG ISRAEL OF JAMAICA ESTATES

YOUTH LEADER APPLICATION 2019-2020

Please complete this form in its entirety. Answer all questions as fully as you can. Submit form to YIJE office (or scan to youth@yije.org) **NO LATER THAN June 7, 2019**. Please note that there are a limited number of positions available and early applications will be looked upon favorably.

LAST NAME		FIRST NAME	
ADDRESS		ZIP	
HOME PHONE #	CELL PHONE #	DATE OF BIRTH ____/____/____	
EMAIL ADDRESS			
WHERE WILL YOU BE FOR THIS SUMMER?		HOW CAN YOU BE REACHED IN SUMMER?	
SCHOOL (as of 9/17)		GRADE (as of 9/19) <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> COLLEGE	

WHAT AGE CHILDREN WOULD YOU PREFER TO WORK WITH? (be <u>grade</u> specific if possible in order of preference)		
CHOICE 1: _____	CHOICE 2: _____	CHOICE 3: _____

WOULD YOU PREFER A MORNING OR AFTERNOON GROUP?
<input type="checkbox"/> MORNING <input type="checkbox"/> AFTERNOON (We will try to accommodate your request, but <u>cannot guarantee it</u>)

HAVE YOU EVER WORKED IN A YOUTH ORIENTED SITUATION BEFORE? IF YES, WHERE AND IN WHAT CAPACITY? (e.g. Counselor in camp, regular babysitting job)

WHAT YIJE YOUTH PROGRAMS DO YOU CURRENTLY ATTEND REGULARLY?

WHAT SPECIAL EVENTS AND/OR YOUTH PROGRAMS HAVE YOU BEEN INVOLVED WITH AT YIJE WITHIN THE PAST YEAR? HOW WERE YOU INVOLVED?

IN YOUR OPINION, WHY IS IT IMPORTANT TO HAVE AN ACTIVE AND VIBRANT YOUTH PROGRAM IN OUR SHUL AND WHAT AREAS OF THE PROGRAM DO YOU SEE AS MOST ESSENTIAL?

EXPLAIN WHY YOU WANT TO BE A YOUTH LEADER AT THE SARA DOMB YOUTH DEPARTMENT.

THIS FORM SHOULD BE RETURNED TO THE SHUL OFFICE OR SCANNED TO YOUTH@YIJE.ORG , NO LATER THAN JUNE 7TH.

FOR OFFICE USE ONLY

Date Received ___/___/___

Reviewed by: _____ Rabbi

Approved? No Yes ___/___/___

_____ Youth Director

Wait List Immediate Hire

_____ Youth Chair

Date Hired ___/___/___

Position _____