GENERAL INTEREST & COMMUNITY INTAKE

Programs, suggestions, mentors, volunteers, internships, and partnerships

GET INVOLVED

Use this form to express interest in a YEP activity, suggest a new program, or offer your time, skills, placement opportunity, or partnership. YEP will follow up as opportunities become available.

CONTACT INFORMATION

Full Name *

Organization / School (if applicable)

Age (if under 18)

Parent / Guardian Name (if under 18)

Phone *

Email *

Address / Neighborhood / ZIP

I am completing this form as a:

- ☐ Youth / Participant
- ☐ Parent / Guardian
- ☐ Mentor
- ☐ Volunteer
- ☐ Intern / Student
- ☐ Instructor / Facilitator
- ☐ Community Partner
- ☐ Sponsor / Business

PROGRAM INTERESTS

Activities of interest (check all that apply):

- ☐ Media & Storytelling
- ☐ Photography
- ☐ Video Production
- ☐ Podcasting / Audio
- ☐ Creative Arts
- ☐ STEAM / Technology
- ☐ Entrepreneurship
- ☐ Career Readiness
- ☐ CDL / Transportation
- ☐ Mentoring / Leadership
- ☐ Other

Which specific activity or program interests you most, and why?

Suggest a new activity, class, workshop, or training program for YEP:

GENERAL INTEREST & COMMUNITY INTAKE

Tell us how you would like to contribute

BUILD WITH YEP

MENTOR, VOLUNTEER, INTERNSHIP, OR PARTNERSHIP INTEREST

I would like to be considered for:

- ☐ Mentor
- ☐ Volunteer
- ☐ Internship
- ☐ Student Placement / Practicum
- ☐ Guest Speaker
- ☐ Workshop Leader
- ☐ Instructor / Facilitator
- ☐ Program Partner
- ☐ Sponsor / Donor
- ☐ Employment / Career Partner

Relevant skills, experience, certifications, or resources you can offer:

What population, subject, or activity would you prefer to support?

General Availability

Preferred Start Timeframe

Best Days / Times

Preferred Contact Method

Links, portfolio, resume, social media, or professional profile (optional):

ACKNOWLEDGMENTS

Please check each applicable statement:

- ☐ I understand this is an interest form and does not guarantee placement.
- ☐ I agree to be contacted about YEP programs and opportunities.
- ☐ If working with minors, I am willing to complete required screening and clearances.
- ☐ I confirm that the information provided is accurate to the best of my knowledge.

Applicant Signature

Date

YEP Staff Use: Referred To / Follow-Up Date / Notes