



PLACER COUNTY JUVENILE JUSTICE/ DELINQUENCY PREVENTION COMMISSION

Application for Membership

Please Print or Type

Name: _____

Residence Address: _____

Mailing Address: _____

Phone Number(s): _____ (Home): _____ (Business): _____

Fax Number: _____ Email address: _____

Employment Experience:

Specialized or Personal Experience:

Educational Experience:

Your application will be submitted to the Executive Committee of the Juvenile Justice/ Delinquency Prevention Commission. You will be contacted regarding an interview and the interview committee will make a recommendation to the Judge of The Superior Court, who will make the appointment. A resume containing other pertinent information about yourself would be helpful to the committee in evaluating your application; please attach one if you can. You will be notified of their decision.

Date: _____

Signature of Applicant

Applications must be returned to:
Juvenile Justice/Delinquency Prevention Commission
c/o Placer County Probation Department
2929 Richardson Drive, Suite B
Auburn, CA 95603