



City of Tigard Youth Peer Court Application

Peer Court Application

The Tigard Youth Peer Court allows community service oriented youths interested in the criminal justice system an opportunity to help law enforcement and their community. Those selected will be trained to perform specific court functions and must dedicate at least one evening per week to this function.

In order to preserve the image of the justice system and its representatives, the Tigard Youth Peer Court maintains high entry standards.

Applicant Requirements

1. Must be between the ages of 12 - 17;
2. Must have an excellent citizenship record and be of sound moral character;
3. Must be attending school and have no less than a 2.5 GPA*.

Area of Interest

Check one of the following:

- Court officer (attorney, bailiff, court recorder, court clerk)
- Juror
- Both

Return completed application to:

**Youth Programs Manager Sheryl Huiras
Tigard Youth Peer Court
13125 SW Hall Blvd.
Tigard, OR 97223
Phone: 503-718-2578**

Applications should be typed or neatly printed

*exceptions made for sufficient cause on a case by case basis



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Personal Information

Name:	Last	First	MI
Address		City/State/Zip	
Phone		Work Phone	
Preferred Name		Driver's License #	
Date of Birth		Place of Birth	
School Attending		Grade	
Have you ever been arrested?		If yes, explain.	
Do you live with parents, guardian, spouse, or on your own?			
Father's Name			Phone
Address		City	Zip
Mother's Name			Phone
Address		City	Zip
Brother or Sister's Name		Age	Phone
Address		City	Zip
Brother or Sister's Name		Age	Phone
Address		City	Zip

IF EXTRA SPACE IS NEEDED, USE THE BACK OF THIS PAGE



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Personal References

Name		Phone
Address	City/State/Zip	
Name		Phone
Address	City/State/Zip	
Name		Phone
Address	City/State/Zip	

Please write a short statement on what you want to achieve and what you have to offer the City of Tigard Youth Peer Court (continue on the back if necessary).

By signing this application, I affirm that these statements are true and accurate to the best of my ability, and I understand any false statements will be grounds for disqualification of my application or termination from a position with the City of Tigard Youth Peer Court.

Signature of Applicant

Date

Signature of Parent or Guardian

Date