



Junior Board Application for 2024-2025 School Year

Our Mission:

Feed The Hungry. Heal the Hurting. Welcome the Stranger.

We strive to strengthen the capacities and influence of our Catholic Charities Eastern Washington mission by engaging a younger, mission-minded, heart-for-service leadership team, so that together we may pursue our vision of a more compassionate, respectful, collaborative, and justice-filled community.

Our Vision- A Heart for Service

Our Junior Board is comprised of young individuals who are ready to jump into action at all levels in our mission to serve. These young men and women will serve as our CCEW representatives in all facets of our service, whether volunteering, assisting with events, meeting & greeting, praying, sitting at the table at CCEW Board meetings, or launching new and creative initiatives. This will always be done with guidance from a CCEW team member. This is not just for Catholic youth, but a city-wide all-inclusive, service-minded team.

We want each individual CCEW Junior Board member to leave positively changed and impacted by their involvement and their work within our programs to serve the poor and vulnerable.

To serve on the Junior Board you must:

- Be a Freshman, Sophomore, Junior, or Senior enrolled in high school for the 2024-2025 school year
- Be in good academic and disciplinary standing at your school (3.0 GPA or higher)
- Attend a high school within Spokane County
- **Be available for monthly in-person meetings for EITHER the Fall or Spring terms or BOTH**
 - Option 1: Fall Term - Serve September - December 2024
 - Option 2: Spring Term - Serve January - April 2025
 - Option 3: Full Year - Serve September 2024 – April 2025
- **Commit to at least 3 service opportunities per term**
 - Required to receive a certificate of participation and any letter of recommendation from the Junior Board supervisors.

Submit a volunteer application on our website; please indicate “Junior Board” when prompted www.cceasternwa.org/applynow

Finally, to submit your Junior Board application please complete the following pages and email to volunteering@cceasternwa.org by September 9, 2024.



2024-2025 Catholic Charities Junior Board Application

Name: _____
Last MI First

Preferred Nickname (if applicable): _____

Date of Birth: _____
mm/dd/yyyy

Mailing Address: _____
Street City State Zip

Cell Phone: _____ Email: _____

Emergency Contact/Relationship: _____

Emergency Contact Cell Phone: _____

School name: _____ Year in School (for '24-25): _____

Extracurricular Activities (sports, clubs, etc.): _____

I am interested in serving on the Catholic Charities Junior Board for the following term (check one):

Fall Term: September - December 2024

Spring Term: January - April 2025

Full Year: September 2024 - April 2025

More About You...

Our Mission Statement: *Catholic Charities affirms the dignity of every person, partnering with parishes and the greater community to serve and advocate for those who are vulnerable, bringing stability and hope to people throughout Eastern Washington.*

1. What does the mission of the Catholic Charities mean to you (see above)?

2. Why are you interested in serving as a member of the Catholic Charities Junior Board?



**STUDENT VOLUNTEER PROGRAM
PARENTAL ACKNOWLEDGEMENT/PERMISSION FORM**

(Along with the volunteer application, this form is required for all high school students ages 16 and 17.)

I give permission for _____ (Name of Student) to work as a volunteer for Catholic Charities Eastern Washington in the Catholic Charities Junior Board Program.

I am aware that he/she will be working as a volunteer at this program. I understand that he/she is registered as a volunteer covered by supplemental insurance and will be provided a short orientation prior to beginning volunteer work. To the best of my knowledge, he/she has not been convicted of any crimes against persons or property.

I, my personal representatives, heirs and assigns do hereby agree to protect, defend, hold harmless and fully indemnify Catholic Charities Spokane, its programs, agents, officers, employees, insurers, and assigns, for any claim or cause of action arising out of strict liability or ordinary negligence in any way connected with my child's volunteer activity which causes my child physical harm or property damage. I further agree to release, hold harmless and indemnify Catholic Charities Spokane, its programs, agents, officers, employees, insurers, and assigns, from any claim, judgment or expenses which may be incurred by my child's participation in said activity.

Signature of Student Volunteer

Age

Date of Birth

Name of Parent/Guardian (please print)

Signature of Parent/Guardian

Date

A PHOTOCOPY OF YOUR CURRENT DRIVER'S LICENSE OR STUDENT ID CARD MUST ACCOMPANY THIS APPLICATION.

Thank you for your application! We will contact you by email to let you know if you have been selected.

Please mail the completed application and copy of ID to:

Catholic Charities Eastern Washington
Attn: Junior Board
PO BOX 2253
Spokane, WA 99210-2253

OR email a scanned copy to volunteering@cceasternwa.org