



Action Team® High School Application Form (Enrollment for 2011-2012 School Year)

[Please complete and return via e-mail to ActionTeam@mlbpa.org or fax to 212/752-4378]

Background Information

School's Name: _____

School's Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____

Number of students: _____

Public school _____ Private school _____ Charter _____ Other _____

School environment: Rural _____ Suburban _____ Urban _____

Does your high school require or strongly encourage community service hours before graduation?

Yes _____ No _____ If yes, how many hours? _____

School Contact Information:

School Contact Person's Name: (Teacher or Administrator)

[Print Name] _____

[Signature] _____

Title: _____

Day-time phone number: _____

Cell phone number: _____ Email address _____

In submitting this application, I confirm that I have not been convicted of any misdemeanor, felony or other criminal offenses.

Membership Criteria

Check the following criteria your school is willing/able to meet:

_____ Have at least one teacher or adult school coordinator manage the program and communicate with the Players Trust and Volunteers of America

_____ Select 5-10 students per school to serve as Action Team Captains. Captains conduct presentations at various times during the school-year to recruit other youth to volunteer, and serve as leaders when planning volunteer projects under the supervision of the school's Action Team adult coordinator

_____ Encourage volunteering and community service among the student body

_____ Schedule permitting, participate in monthly Action Team conference call with your Team Captains

_____ Conduct at least two volunteer projects during the school year

_____ Complete submit an activity report before the end of the school year including types of activities held, number of people helped, number of volunteers, volunteer hours, dollars raised (if applicable), in-kind contributions (if applicable), and human interest stories

List any volunteer and community service activities that have been completed in the past year at your school.

Why do you want to join the Action Team program?

How did you learn of the Action Team program?

Date of submission: _____