Real-World Career Experiences

Exploring®

CLUBS: For young men and women in sixth, seventh, and eighth grades who have completed the fifth grade and are at least 10 years old but have not completed the eighth grade and are not yet 15 years old.

POSTS: For young men and women who are at least 14 (and have completed the eighth grade) or 15 years of age but not yet 21 years old.

YOUTH APPLICATION

Exploring is based on a unique and dynamic relationship between youth and the organizations in their communities. Local community organizations initiate a specific Explorer post or club by matching their people and program resources to the interests of young people in the community. The result is a program of activities that helps youth pursue their special interests, grow, and develop.

Explorer posts/clubs can specialize in a variety of career skills. Exploring programs are based upon five areas of emphasis: career opportunities, life skills, citizenship, character education, and leadership experience.

LEARNING FOR LIFE®
PreK-12 Programs Career Exploring

524-009
SKU 619579

Tips for completing the Application for Exploring Youth Participant:

- ➢Print—do not use cursive.
- ➢Use black or dark blue ink.
- ➢Press firmly when printing.
- ➢Print one letter only in each box.
- ➢Use uppercase letters and stay within the blue boxes for legibility.
- ➢Fill in circles; do not use check marks.
- ➢Make sure you have all needed signatures on application.
- ➢Don't alter the application—it could affect the quality of the scan.

Mailing address example:

7	0	3		F	I	R	S	T		S	T	

Participant Chart

Term per month	Youth/adult participant fee
1	2.75
2	5.50
3	8.25
4	11.00
5	13.75
6	16.50
7	19.25
8	22.00
9	24.75
10	27.50
11	30.25
12	33.00
13	35.75
14	38.50
15	41.25
16	44.00
17	46.75
18	49.50

Cut along dotted line.

TEMPORARY PARTICIPANT CERTIFICATE

(Good for 60 days)

This certifies that

_____

is a member of _____

_____

Post or club leader signature

_____

Date

Explorer Club Exploring (Real-World Career Experiences)

YOUTH

USE BLACK OR DARK BLUE INK ONLY.

- Print—do not use cursive.
- Print one letter or number only in each box.
- Use uppercase letters and stay within the blue boxes for legibility.

- Fill in radio buttons completely.

○ Exploring Post ○ Explorer Club Number:

Na **…nt one letter in each space—press hard, you are making a copy.)**

First name: KATHLEEN | Middle name: JANE | Last name: SMITH | Suffix:

Country: US | Mailing address: 1234 ANY STREET | City: ANYTOWN | NY | 12345

Phone: 555-123-4567 | Date of birth (mm/dd/yyyy): 01/01/1998 | Grade: 10

Ethnic background:
○ Black/African American ● Native American ○ Alaska Native ○ Asian
○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

School: OAK TREE HIGH SCHOOL

Gender: ○ Male ● Female

Email address (Post youth participant only): KATHYJS@MYMAIL.COM

Parent/guardian information

Select relationship: ○ Parent ○ Guardian ● Grandparent ○ Other (specify)

First name **(No initials or nicknames)**: DEBORAH | Middle name: SUE | Last name: SMITH | Suffix:

Country: US | Mailing address: 1234 ANY STREET | City: ANYTOWN | State: NY | Zip code: 12345

Home phone: 555-123-4567 | Date of birth (mm/dd/yyyy): 01/01/1972 | Occupation: VP OPERATION | Employer: RGK INTL

Gender: ○ M ● F

Business phone: 555-765-4321 x | Ext. | Previous Exploring experience: FIRE EXPLORER | Cell phone: 555-253-6118

Parent/guardian email address: DEBORAH.SMITH@

- Make sure you have all needed signatures on application.

I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).

Bill Taylor

Signature of post or club leader

05 / 13 / 2016

Date

Deborah Sue Smith

Signature of parent/guardian

Kathy Smith

Signature of Explorer

Participation fee $ ____ . ____ Paid: ☐ Cash ☐ Check No. _____ ☐ Credit card

524-009

Retain on file for three years.

SAMPLE

YOUTH PARTICIPANT

○ Exploring Post ○ Explorer Club Number:

If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

○ Transfer application Transfer from council no.:

○ Exploring Post ○ Explorer Club Number:

Name and address information **(Please print one letter in each space—press hard, you are making a copy.)**

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

U S

Phone - - Date of birth (mm/dd/yyyy) / / Grade

Ethnic background:

○ Black/African American ○ Native American ○ Alaska Native ○ Asian

○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

School

Gender: ○ Male ○ Female

Email address (Post youth participant only) @

Parent/guardian information

Select relationship: ○ Parent ○ Guardian ○ Grandparent ○ Other (specify)

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

U S

Home phone - - Date of birth (mm/dd/yyyy) / / Occupation Employer Gender: ○ M ○ F

Business phone - - X Ext. Previous Exploring experience Cell phone - -

Parent/guardian email address @

Signature of post or club leader

Date / /

I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).

Signature of parent/guardian

Signature of Explorer

Participation fee $. Paid: ☐ Cash ☐ Check No. _____ ☐ Credit card

LOCAL OFFICE COPY

524-009

Retain on file for three years.

YOUTH PARTICIPANT

○ Exploring Post ○ Explorer Club Number:

If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

○ Transfer application Transfer from council no.:

○ Exploring Post ○ Explorer Club Number:

Name and address information **(Please print one letter in each space—press hard, you are making a copy.)**

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

US

Phone - - | Date of birth (mm/dd/yyyy) / / | Grade

Ethnic background:

○ Black/African American ○ Native American ○ Alaska Native ○ Asian

○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

School

Gender: ○ Male ○ Female

Email address (Post youth participant only) @

Parent/guardian information

Select relationship: ○ Parent ○ Guardian ○ Grandparent ○ Other (specify)

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

US

Home phone - - | Date of birth (mm/dd/yyyy) / / | Occupation | Employer | Gender: ○ M ○ F

Business phone - - X Ext. | Previous Exploring experience | Cell phone - -

Parent/guardian email address @

Signature of post or club leader

Date / /

I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).

Signature of parent/guardian

Signature of Explorer

Participation fee $. Paid: ☐ Cash ☐ Check No. _____ ☐ Credit card

POST OR CLUB COPY

524-009

Retain on file for three years.

YOUTH PARTICIPANT

○ Exploring Post ○ Explorer Club Number:

If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

○ Transfer application Transfer from council no.:

○ Exploring Post ○ Explorer Club Number:

Name and address information **(Please print one letter in each space—press hard, you are making a copy.)**

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

U S

Phone - - | Date of birth (mm/dd/yyyy) / / | Grade

Ethnic background:

○ Black/African American ○ Native American ○ Alaska Native ○ Asian

○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

School

Gender: ○ Male ○ Female

Email address (Post youth participant only) @

Parent/guardian information

Select relationship: ○ Parent ○ Guardian ○ Grandparent ○ Other (specify)

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Country | Mailing address | City | State | Zip code

U S

Home phone - - | Date of birth (mm/dd/yyyy) / / | Occupation | Employer | Gender: ○ M ○ F

Business phone - - X Ext. | Previous Exploring experience | Cell phone - -

Parent/guardian email address @

Signature of post or club leader

Date / /

I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).

Signature of parent/guardian

Signature of Explorer

Participation fee $. Paid: ☐ Cash ☐ Check No. _____ ☐ Credit card

EXPLORER COPY/RECEIPT

524-009

Retain on file for three years.