**YOUNG DOCENT PROGRAM APPLICATION FORM:**
**Deadline May 20, 2011**

**Candidates applying for this program must be able to make a full commitment for the duration of the program, beginning June 20th through August 19th. Special circumstances such as freshman orientation should be indicated on the application.**
(PLEASE PRINT)

LAST NAME FIRST MIDDLE

ADDRESS

CITY STATE ZIP

PHONE CELL EMAIL

AGE DATE OF BIRTH GRADE

SCHOOL

PARENT OR LEGAL GUARDIAN NAME

DAYTIME CONTACT NUMBER OF PARENT OR LEGAL GUARDIAN

**Please check if applicable:**
I am available to participate throughout the duration of the program; June 20th – August 19, 2011. _____
I have a special circumstance that will prevent me from attending the entire run of the program. _____

Event:_____ Date(s)_____

**Please check if applicable**:
I am willing to work evening events at CAAM: _____
I have a valid driving license and vehicle:_____

**Mail this form along with your personal statement and your letter of recommendation to:**

California African American Museum
Young Docent Program
Attention: Elise Woodson
600 State Drive, Exposition Park
Los Angeles, CA 90037

CALIFORNIA AFRICAN AMERICAN MUSEUM