**AFFIRMATION AND RELEASE**

I, Click here to enter text hereby affirm that all of the answers on The Jefferson Parish Department of Juvenile Services Volunteer/Intern Application are true to the best of my knowledge. I hereby authorize the Jefferson Parish Department of Juvenile Services to investigate my background to determine my fitness for an assignment. I understand that the information requested in this application will be used only for the purpose of determining my suitability for the program and part of that suitability will require a random drug test to which I now give consent. Further, I understand that after the successful completion of my training, I will be expected to serve a full semester if interning and minimum of nine months if mentoring, or for as long as the child (or children) are under the Court's jurisdiction. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to my volunteer supervisor as soon as possible. I am aware of the sensitive and confidential nature of the official documents, reports, and other material I will examine in my capacity as a volunteer or intern, and I understand that I may discuss this information only with those persons who are parties to the case, their legal representatives, or those persons who will be consulted for their professional knowledge or expertise.

Signature

Click here to enter a date

Print Name