COOK COUNTY SHERIFF THOMAS J. DART COMMITMENT TO SERVICE AWARD

"Volunteering is an act of heroism on a grandscale. And it matters profoundly.

It does more than help people beat the odds; it changes the odds."

- William J. Clinton

Volunteers make a difference in individual lives as well as communities. Many of these contributions of time and talent are given by concerned and dedicated youth. To recognize these efforts, the Sheriff of Cook County, Sheriff Thomas J. Dart, sponsors the Sheriff's Office Commitment to Service Award. This award is given to residents of Cook County, grades 9-12, who have provided meaningful volunteer service to their communities. A minimum of 100 hours of voluntary (unpaid) community service is required to qualify.

Youth Application Procedure:

- 1. Complete Parts I IV. Please type or print.
- 2. Part IV must be signed and completed by a project supervisor for each of your volunteer experiences.

Eligible Community Service Hours:

- Must equal a minimum of 100 hours (not including hours served as a school requirement)
- Must be earned between September 1, 2024 and August 31, 2025
- Applicant must be a high school student (grades 9 12) while volunteering
- May be direct service, fundraising, planning, or support activities
- May be performed independently under a service supervisor, or with one or more organizations, or religious groups
- Service performed at school during school hours will not be accepted
- Must be for the benefit of the community (services to family, friends, or extra-curricular school and sport activities, i.e. Theater, will **not** be accepted)
- 3. Return completed application to:

SHERIFF'S OFFICE COMMITMENT TO SERVICE AWARD

Cook County Sheriff 's Office Juvenile Justice & Advocacy Unit

1401 Maybrook Drive

Room 150

Maywood, IL 60153

708-865-2900

OR EMAIL:

ccso.comserve@ccsheriff.org

SHERIFF'S OFFICE COMMITMENT TO SERVICE AWARD

Candidate Information

(Please type or print)

NAME:		First	Λ	/liddle
ADDRESS:			·	
(Cook County Residents Only)	Street		City	Zip
TELEPHONE: (Home)		(0	Cell)	
DATE OF BIRTH: / /	SEX: M	F		
SCHOOL:			GRADE LEVEL:	2024/2025 School Year
Name	То	own		
EMAIL ADDRESS:				
NAME OF PARENT/GUARDIAN:				
EMAIL ADDRESS:				
TELEPHONE: (Home)(if different from above)		(0	Cell)	
PART II				
			REQUIRED Supervisor's	
			Statement(s)	
Organizations/Volunteer	Sites		(Part IV) (attached-please check)	Hours
1.			(
2.				
3				
4				
5.				
(use a separate sheet if necess	ary)		Total	
			Total	(100 hrs. minimum)

PART III: PERSONAL STATEMENT

PART I: COMPLETE IN FULL

In 100 words, describe what you feel has been the value of your community service to others and to yourself. (Use a separate sheet and attach)

Reproduce additional copies of Part IV as needed. SHERIFF'S OFFICE COMMITMENT TO SERVICE AWARD

Candidate Information

(Please type or print)

PART IV: COMPLETE IN FULL			
Service supervisor's statement for:			
		Name of Candidate	
NAME OF SUPERVISOR:		POSITION:	
ORGANIZATION:			
ADDRESS:		PHONE:	
Street	City	Zip	
Describe each of the community servi was under your supervision. Attach ac		g number of hours worked) for which the onecessary.	candidate
Please comment on how the above list	sted activities benefite	ed the community.	
		has performed ration named above between <mark>Septembe</mark>	
SIGNATURE:		DATE:	

NOTE: Part IV must be included from each project supervisor. Those service hours without a corresponding service supervisor's statement will be considered incomplete.