



Young Professionals Network

Membership Agreement

I wish to participate as a member of Young Professionals Network. I have received an orientation and agree to these conditions of membership.

Please **initial the box** at each item to show that you understand that item and agree to its terms.

- I will work with my Young Professionals Network advisor to develop my individual membership plan, and will participate in sessions and activities as scheduled.
- I will keep appointments made for individual guidance and counseling, mentoring, job shadowing and other activities as required.
- I understand that placement into work or other activities will be based on a thorough assessment of my current skills, abilities, interests, aptitudes and personal circumstances as discussed with my Young Professionals Network advisor and I agree to participate in activities assigned to me during my membership and give them my best effort (even if I don't like some of them).
- I understand that my membership can be terminated immediately at any time for appropriate cause. The following are examples of cause for termination.
 - ✓ Being late, poor attendance, missing appointments, not meeting the dress code
 - ✓ Poor work performance or not applying myself or participating fully in activities
 - ✓ Theft, lying, deceit
 - ✓ Refusal to cooperate with staff, worksite supervisors or other authorized persons
 - ✓ Smoking on site, drugs, weapons

My membership can be terminated for other appropriate cause as determined by staff.

- I understand that Young Professionals Network will be highly publicized and that newspapers, magazines, television and other media might take pictures for promotional use, that I will receive no compensation for their use and I hereby give my permission for the use of any pictures taken.
- I agree to treat others (members, staff, supervisors and anyone else I come into contact with during participation) with respect and to resolve any personal situations in a mature manner.
- Throughout my participation I will strive to learn and grow, making the most of my time as a member of Young Professionals Network.
- I agree to keep in contact with the Young Professionals Network advisors for one year after leaving the program to determine the long term results of my participation and to determine if the Young Professionals Network program can further assist me in achieving my long term goals.

Member's Signature

Date

Parent Signature (If under 18)

Date

Young Professionals Network Advisor Signature

Date