

PURE & SIMPLE LIFESTYLE Project

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TEEN INSTRUCTOR APPLICATION

Use back of this form as needed to provide other information

PRINT name: _____

Ethnicity: _____ Age: _____ Date of birth: _____ Circle: Male/ Female

Address: _____
Street City State Zip Code

Home phone: () _____ Cell phone: () _____

E-mail address: _____ Circle the answer that best fits you:
e-mail is checked (1) regularly (2) rarely

Elementary/Middle School Attended: _____

High School currently attending: _____ Class of _____

Print name of parent/guardian _____

Parent Telephone Number: _____

Parent Address (if different from above): _____

Other important information we should know: _____

Do you have a job? Y/N _____ Are you involved in sports, drama, other? _____

Write a statement that tells why you have chosen to be abstinent until marriage: (use back of this form if needed.)

Carefully read the following statement of assurances that includes your permission to participate in the Pure & Simple Lifestyle Project and evaluation surveys:

I understand that as a Teen Instructor I will be trained to present the Pure & Simple Choice episodes that will be scheduled during each school year and summer programs. This will require that I make a commitment to attend as many training/practice sessions as possible, get necessary permission as needed to be excused from one day of classes each semester if needed, or be available as able for scheduled presentations during evening or weekends. Above all, I understand that I've made the commitment to refrain from all sexual activity until marriage and to avoid alcohol, drug and tobacco use. Also, since this is a federally funded abstinence program I may not insert religious instruction in my presentation, and I may not encourage the use of contraception as a means to avoid pregnancy or sexually transmitted diseases.

I am seeking permission of my parent/guardian to either drive myself or ride with other designated drivers to scheduled activities associated with the Pure & Simple Lifestyle Project.

Signed by Teen Instructor applicant: _____ Date: _____

Application Location: _____ PSL Staff: _____ District: _____

Attended WAR: ___ Yes ___ No Location Attended WAR: _____ Consent Forms Collected: ___ Yes ___ No

For Office Use Only:

Eligible:	District of Residence	1 st Contact	2 nd Contact
Yes No		Date: Result:	Date: Result: