

**APPLICANT INFORMATION** 

## **Application Form**

## MASTER RECYCLER



**Application Instructions:** 

Interested applicants must complete all sections of this application. Applicants under age 18 are required to have a parent or guardian complete the parent consent portion of this application. Send completed application to zerowaste@phoenix.gov

Name (Last, First, MI)									
Age	Date Of Birth				Grade (If App	olicable)			
		D D M	1 M	Y Y	School (If App	olicable)			
Full Address									
Zip Code		City				State			
E-Mail	ail Phone Number								
EMERGENCY CONTACT INFORMATION									
Parent/Legal Guardian Name (if applicant is under age 18)									
Parent/Legal Guardian Number (if applicant is under age 18)									
Contact 1 Name					Contact 1 R	elation			
Contact 1 Number Contact 1 Alternate Number									
					0				
Contact 2 Name	9				Contact 2 F	Relation			
Contact 2 Numb	per		Conta	ct 2 Alter	nate Number				





RECR	RECRUTMENT INFORMATION								
How did you hear about this program opportunity?									
Colleague	Teacher	Tabling Event	Neighbor						
Social Media	Transfer Station Tour	Other							