

# JA Company Program<sup>®</sup>



## Product Approval Application

Name of JA Area Office: \_\_\_\_\_

JA Company Name: \_\_\_\_\_

Student Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Volunteer Information:

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

(Check One) In-School  After-School

Please describe in detail the product or event:

### **Safety:**

Is your product or service safe and legal? Yes  No

Could your product or service physically hurt someone even though it was not intended for this purpose?

How will you ensure safety?

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### **Design:**

Does your product incorporate a design? Yes  No

If so, is it a copyrighted image Yes  No  or is the design one that you created? Yes  No

(Using copyrighted material is prohibited. Please ensure any company logos or product designs are original. Send the mock-up of the design or logo with this form for review if available.)

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### **Manufacturing and Implementation:**

Will this product be purchased from an outside source/vendor or manufactured by students? If outside source, please identify.

If the final product is being purchased from an outside source, will you be altering the product in any way? Yes  No   
If yes, please explain.

If the product is being manufactured by JA students, please give a detailed description of how this product is being produced (including any tools, materials etc. being used in the manufacturing of this product).

Describe safety measures put into place to ensure no injuries in the manufacturing process.

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