

LEADERSHIP...Is it in YOU?

Aumsville Youth Council (AYC) Application Form

NAME: _____ AGE: _____

ADDRESS: _____ HOME PHONE: _____

PAGER/CELL: _____ E-MAIL ADDRESS: _____

How long have you lived in the Aumsville Area?

List your interests & activities (hobbies, organizations, clubs, sports, positions held, etc.)

What do you see as the role of youth in our society, and how would you like that to change in the future?

Why do you want to serve on the Aumsville Youth Council? (please be specific)

Can you commit to attending monthly meetings? (list any schedule conflicts)

I understand that if I am selected as a member of the City of Aumsville, Youth Council, I will need to attend monthly meetings and participate in a manner which brings honor and respect to the AYC.

Signature

Date

I give permission for _____ to apply for the Aumsville Youth Council (AYC). If selected, I will support _____ in attending meetings and functions of the AYC.

Signature of Parent or Guardian

Date

I recommend _____ for the position of Aumsville Youth Council.

Signature of School Administrator/Counselor

Date