



YOUTH ADVISORY COUNCIL – APPLICATION

Teens in grades 6-12 who would like to volunteer and work with the Youth Advisory Council are encouraged to fill out the application below. If you need additional information, please call the Office on Youth at 804-520-9286.

This application is divided into the following sections:

- SECTION A - Applicant Information
- SECTION B - Additional Questions
- SECTION C - Reference Information
- Note to Parents and Form Submission

Fill out the information in each section as requested.

SECTION A - Applicant Information

1. Name (Last, First)
2. Street
3. City
4. State
5. Zip Code
6. Home Phone # Cell Phone #
7. Email Address
8. Will you be able to attend a YAC meeting on the last Wednesday night of each month from 6-7 pm?
9. Date of birth
10. Grade currently enrolled

SECTION B - Additional Questions

1. How would you rate the youth activities in the City of Colonial Heights?

2. What problems do you think exist for youth of Colonial Heights?

3. Do you have a part-time job during the school year?
4. Do you work during the summer?
5. If you do have summer employment is it Part-time Full Time?
6. What kinds of things do you think should be done to help the youth of Colonial Heights?

SECTION C -- Reference Information

1. Do you know any of the current YAC members?
2. If yes, please list names

3. List at least one person who would be willing to be a reference for you. (Please give name, address, phone number, etc.)

Note to Parents

The YAC does not provide accident insurance to cover your son or daughter while participating in YAC activities. Accident insurance is your responsibility. Do you currently have hospitalization or health insurance?

If yes, with which company?

Policy No.

If you are printing this form your signature is required.

Applicant Signature

Parent
Signature