



ALPINE YOUTH COUNCIL APPLICATION 2008-2009

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

BIRTHDAY: \_\_\_\_\_ GRADE IN SCHOOL 2008-2009: \_\_\_\_\_

GPA AND CITIZENSHIP: \_\_\_\_\_

PARENTS' NAMES: \_\_\_\_\_

Are you employed? \_\_\_\_\_ How many hours a week? \_\_\_\_\_

School/community activities you're involved with: \_\_\_\_\_

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How many hours each month can we depend on you to participate with the Youth Council on service projects and activities? \_\_\_\_\_

Youth Council positions I am interested in holding \_\_\_\_\_

***During the year, the youth council meets every 1st and 3rd Thursday of each month for about an hour. In addition, there are also mandatory service projects and activities required. Will you be able to schedule your time around these requirements? Yes No***

Please list some ideas you have that the council could use next year in improving Alpine and being of service to our community:

- 1.
- 2.
- 3.

The Youth Council needs Parent Advisers in order to function. We currently need an additional parent or two. Please let us know if you have a parent who could help.

Questions: Jan Richards 492-3536

Student's signature:

Parent's signature:

Please mail or bring this application to Jan Richards 575 N Bald Mountain Dr., Alpine, UT 84004 by March 7, 2008. You will be notified of a time and date for an interview. ☺