

City of Stockbridge 4640 North Henry Blvd. Stockbridge, GA 30281

APPLICATION FOR THE STOCKBRIDGE YOUTH COUNCIL

| / / | | | | |
|--|--------------|--|--|--|
| Commitment | | | | |
| To successfully complete the City of Stockbridge Youth Council, a partic | cipant must: | | | |
| □ Be a resident of the City of Stockbridge. □ Attend a school (or home school) and be in the 10th, 11th or 12th grade for the 2017-18 school year. □ Commit to attend at least 15 of 20 of the scheduled monthly meetings, June – May. □ Agree to complete a community service project. □ Obtain transportation to and from meetings and events. □ Have a minimum 2.5 GPA. | | | | |
| Code of Conduct | | | | |
| □ Be prompt and present at all meetings and dress appropriately. □ Be respectful in the treatment of and the interaction with other people. □ Be mindful of safety issues to ensure that everyone stays safe from harm and injury. □ Be courteous and do not talk on or use a cell phone during meetings (silence cell phone please). □ Be aware of inappropriate behavior and stay out of trouble at home, school and in the community. □ Always conduct yourself in a respectable manner. | | | | |
| APPLICANT INFORMA | ATION | | | |
| Applicant Name: | | | | |
| Name you prefer to be called: | | | | |
| School (Home school is acceptable): | | | | |
| Grade level (2017-18):10th11th12th | | | | |
| Home Address: | | | | |
| City: Zip: | | | | |
| Home Phone: () | | | | |
| E-Mail: | | | | |
| Cell Phone: () | | | | |
| Polo Shirt Size: S M L XL XXL | | | | |
| Food Allergies/Special Diet: | | | | |
| Parent(s)/Guardian Name: | Phone: | | | |
| Parent(s)/Guardian Email: | Phone: | | | |

| 1) | How long have you been a resident of the City of Stockbridge? Years Months | | | | | |
|------------|---|--|--|--|--|--|
|) | Are you willing and available to attend most of the meetings of the Youth Council? ☐ Yes ☐ No | | | | | |
| ;) | ame any organizations, clubs or teams of which you have been or are currently a member and any leadership roles ou have served. You may attach a student resume if you wish; however, please note the attachment below if you do o. | | | | | |
| | Activity/Club/Sport/Etc. Dates/Time Commitment | | | | | |
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| I) | In your opinion, what is one of the most challenging issues facing youth today, and how does it affect your generation? | | | | | |
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| e) | Using a limit of 650 words, write an essay response to ONE of the 2017-2018 essay prompts from the Common Application. You may find the essay prompts here: http://www.commonapp.org/whats-appening/application-updates/common-application-announces-2017-2018-essay-prompts | | | | | |
|) | Please briefly explain your reasons for wishing to serve on the Stockbridge Youth Council: | | | | | |
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| J) | Include two letters of recommendation (forms attached) from at least one teacher or counselor and an adult who has known you and can provide a testimony of your leadership potential and ability to manage the demands of both school and the Youth Council. | | | | | |

APPLICANT STATEMENT

| I understand that I am applying for appointment to the Youth Council of the City of Stockbridge that the appointing authority may require an interview prior to consideration for appointment. I agree to the Commitment, Code of Conduct and the attendance requirement. I agree to comply at all times with all requirements of the Youth Council By-Laws. I acknowledge that I may be suspended or removed from the Youth Council at any time in the sole discretion of the Stockbridge Youth Council Advisory Committee. All statements and information provided in this application are true to the best of my knowledge. | | | | | | | |
|--|---|------------------------------------|--|--|--|--|--|
| Signature | Printed Name | | | | | | |
| PAREN | NT/GUARDIAN STATEMENT | | | | | | |
| As the parent/guardian of this applicant, I sul Youth Council. I understand, acknowledge, a participates in Stockbridge Youth Council. I, my child arising out of any and all events at | assume and accept the risk that the undersigned assume the risk | accidents may occur while my child | | | | | |
| Parent/Guardian Printed Name | | | | | | | |
| Parent/Guardian Signature | | _ Date | | | | | |
| ACADE | MIC OFFICIAL STATEMENT | - | | | | | |
| I confirm that the applicant has a minimum 2 | .5 GPA and has the ability to serv | e on the Youth Council. | | | | | |
| Printed Name and Title of School Official | | | | | | | |

Please return signed application to: City Clerk Fax: 770.389.7912

City of Stockbridge 4640 North Henry Blvd. Email: vholiday@cityofstockbridge-ga.gov

Date

Stockbridge, Georgia 30281

Signature of School Official_

PROCEDURES FOR YOUTH COUNCIL APPOINTMENT

- 1) The City will cause this information to be sent to each educational institution that serves students residing within the city limits of Stockbridge and to be posted via the City's bulletin board, printed newsletter or other means to inform the residents in the city. This notice will also include qualifications (if any) to serve.
- 2) Applications are due on April 17, 2017. Applications may be sent to the City Clerk.
- 3) The Youth Council Advisory Committee will review the applications and select candidates to be interviewed from May 1 through May 5.
- 4) The Youth Council Advisory Committee will announce the successful candidates on May 8, 2017.

Recommendation Letter #1 (Must be Teacher or School Counselor)

| Reference's Name: | | Applicant's Name | a: | |
|--|---|---------------------------------|-----------|--|
| Reference's Email: | | Phone | : | |
| How long have you kno | own the applicant? | | | |
| What is your relationsh | ip to the applicant? _ | | | |
| Please rate the applicar applicant. Please add a | | | | that best describes the |
| Is the applicant depe | | and the space provide | <u> </u> | |
| 1 | 2 | 3 | 4 | 5 |
| Expect numerous no-shows. | | Somewhat dependable. | <u> </u> | 100%! |
| How well does the an | policant work in sma | ll groups with other y | outh? | <u>, I</u> |
| 1 | 2 | 3 | 4 | 5 |
| Not very interactive. | | Demonstrates some initiative. | · | Professional team player. |
| To what extent does | the applicant show s | trong character? | | |
| 1 | 2 | 3 | 4 | 5 |
| Can demonstrate | | Shows some good | · | Great role model and |
| a bad attitude. | 1. 4.1 4.4 | attributes. | 1. 1.11.0 | example for others. |
| How well does the ap | | leadership and public | 4 | 5 |
| Prefers to be told what to | 2 | 3 Might step up if no | 4 | Born to lead & a great |
| do and does not take | | one else will. | | speaker. |
| initiative. | 1 | | 1 1 11 0 | |
| How well does the ap | | strong organizationa | | |
| Constantled asian assume | 2 | 3 | 4 | 5 |
| Constantly losing papers and difficulty | | Usually turns assignments in on | | Turns assignments in early and keeps track |
| remembering due dates. Additional Comments: | | time. | | of due dates. |
| Additional Comments. | | | | |
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| | | | | _ |
| Signature | | Date | | |

Recommendation Letter #2

| Reference's Name: | | Applicant's Name | :: | |
|--|-------------------------|--|------------------|--|
| Reference's Email: | | Phone: | : | |
| How long have you kn | nown the applicant? | | | |
| What is your relations | hip to the applicant? _ | | | |
| | | the following five areasents in the space provided | | r that best describes the |
| Is the applicant dep | endable? | | | |
| 1 | 2 | 3 | 4 | 5 |
| Expect numerous no-shows. | | Somewhat dependable. | | 100%! |
| How well does the a | pplicant work in sma | all groups with other yo | outh? | |
| 1 | 2 | 3 | 4 | 5 |
| Not very interactive. | | Demonstrates some initiative. | | Professional team player. |
| To what extent does | the applicant show s | strong character? | | |
| 1 | 2 | 3 | 4 | 5 |
| Can demonstrate a bad attitude. | | Shows some good attributes. | | Great role model and example for others. |
| | pplicant demonstrate | e leadership and public | speaking skills? | example for others. |
| 1 | 2 | 3 | 4 | 5 |
| Prefers to be told what to do and does not take initiative. | | Might step up if no one else will. | _ | Born to lead & a great speaker. |
| | pplicant demonstrate | e strong organizational | skills? | |
| 1 | 2 | 3 | 4 | 5 |
| Constantly losing papers and difficulty remembering due dates. | | Usually turns assignments in on time. | | Turns assignments in early and keeps track of due dates. |
| Additional Comments | : | | | |
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| | | | | |
| Signature | | Date | | _ |