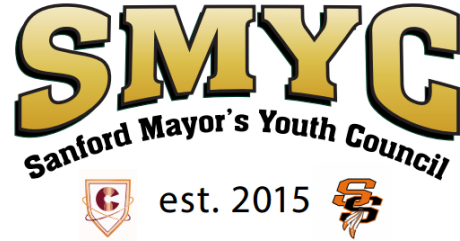




CITY OF  
**SANFORD**  
FLORIDA



## Mayor's Youth Council Application

### 2019-2020 School Year

Application Deadline Submittal May 23, 2019

**Student Information:**

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

Grade level: \_\_\_\_\_

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

\_\_\_\_\_

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

**Please check all that apply:**

I have reliable transportation to get to and from Youth Council meetings/events.

I can be relied upon to attend Tuesday afternoon meetings twice a month 3:30pm-4:30pm.

I initiated my own interest in this program.

I was asked to apply for this position.

**Please describe why you want to be a part of the Mayor's Youth Council:**

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please list any other activities you will be involved in during the school year such as employment, sports, community service, etc.**

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**What skills and characteristics do you possess that would make you a good representative of your community?**

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Are you willing to attend the meetings, events and activities after school, some evenings, and some weekends for the Council for a period of one school-year and commit to making a difference in our city?

\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_\_ Parent Initials

Are you interested in community service points for membership on the Council?

\_\_\_\_ Yes \_\_\_\_ No

I have read and understand the commitment required to be a member of the Sanford Mayor's Youth Council, Inc. I also realize the importance of teamwork, reliability and cooperation. I am willing to make this commitment so I can make a difference for the youth in the City of Sanford.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN THIS APPLICATION TO [Communicate@sanfordfl.gov](mailto:Communicate@sanfordfl.gov) by May, 23, 2019. You will be notified if you are chosen for the 2019-2020 Mayor's Youth Council. Thank you for your interest.**

**Parent/Guardian Contact Information:**

I give permission for my son/daughter to seek the position of representative on the Sanford Mayor's Youth Council, Inc. and I understand the commitment a position on the Mayor's Youth Council entails.

Name(s): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Parent Signature: \_\_\_\_\_