

**Lafayette Mayor's Youth Council
Criteria and Application**

Application for membership in Lafayette Mayor's Youth Council is open to Lafayette youth who complete this application, reside in the City of Lafayette, that are High School students.

The Mayor and City Clerk will appoint Members of the Council. Selection will not be made on the basis of academic, leadership or organizational skills and achievements, but rather on the youth's:

- Interest in participating on the council;
- Willingness to be part of a team that discusses city and issues affecting youth; and
- Commitment to attend a monthly meeting

To apply:

1. Complete this application (please print) and sign.
2. Obtain your parent's or legal guardian's signature, giving you permission to participate.
3. Email (cmurray@lafayette.in.gov) mail or deliver the application so it's received by September 20, 2019 to:

Office of the City Clerk, Cindy Murray
Mayor's Youth Council
20 North Sixth St., City Hall
Lafayette, Indiana 47901

Name: _____ Age: _____

School: _____ Grade: _____

Address: _____ Lafayette, Indiana,

Zip: _____

Telephone: _____ E-mail: _____

Cell # _____ Do You Text? _____

These questions are asked only to assure the council fully represents Lafayette's diversity:

Race or ethnic background: _____ Gender: Male _____ Female _____

I have transportation to Youth Council meetings/events? Yes or No (please circle one)

Why would you like to serve on the Mayor's Youth Council?

What do you believe are the most important issues in the community? (Such as lack of streets light, potholes, beautification etc.)

What are your governmental interests?

What personal skills and characteristics do you possess that would make you a good representative?

What other activities are you involved in?

What times are best for you to meet?

How did you learn of the Council?

What is the Most significant initiative they have accomplished?

Please list two adult references, people who have known you and worked with you in school or non-school activities.

Name	Address	Telephone
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Name	Address	Telephone
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Student Signature

I understand the monthly time commitment required for the Mayor's Youth Council. I also know the importance of teamwork and cooperation and will make such a commitment to this council.

Signature	Date
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Parent/Legal Guardian's Permission

I give my permission for _____ to seek the position of representative on Lafayette Mayor's Youth Council.

Parent/guardian signature	Date
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Telephone number(s) in case of emergency: _____

Name of emergency contact(s) and relationship to youth: _____