



Youth Advisory Committee Application Form

DEADLINE: FRIDAY, MAY 1, 2009

General information (please print)

Name: _____ Age: _____

Home address: _____
(Number & Street) (City) (State) (Zip)

Home phone: (____) _____ E-mail: _____ Male ___ Female ___

Parent(s)/Guardian(s) name(s): _____

School: _____ This fall I will be entering the ____ grade

Why would you like to serve on the Youth Advisory Committee? (The average length of service is 3 to 4 years.)

What will you bring to Youth Advisory Committee (examples: decision making, communication or leadership skills; diverse life experiences)?

School activities/organizations and leadership positions. (If none, list potential areas of interest):

Community activities/organizations and leadership positions. (If none, list potential areas of interest):

Applicant's Signature _____ Date _____

Parent's Signature _____ Date _____

By signing above I acknowledge that being a member of the Youth Advisory Committee requires a time commitment involving attending monthly meetings (currently Sunday afternoons) from September to May. It also involves occasional meetings and/or trainings throughout the school year that may take place during the school day. I acknowledge that the information provided in this application is accurate.

ADDITIONAL COMMENTS FOR THE QUESTIONS ABOVE MAY BE WRITTEN ON THE BACK OF THIS SHEET.



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Letter of Recommendation:

A personal letter of recommendation is required. Please give the attached form to someone other than a family member (e.g. teacher, counselor, employer, etc.). You may have the person writing the letter give it to you to submit with your application or you may ask them to send it directly to us. However, it is your responsibility to see that the letter and your application reach our office by the deadline.

THE COMPLETED APPLICATION PAGE AND LETTER OF RECOMMENDATION ARE DUE AT THE COMMUNITY FOUNDATION OFFICE BY 5PM FRIDAY, MAY 1, 2009.

Petoskey-Harbor Springs Area Community Foundation
Youth Advisory Committee
616 Petoskey Street, Suite 300
Petoskey, MI 49770
(231) 348-5820

Faxed or emailed applications are not permitted.

Upon receipt of a completed application, including the letter of recommendation, each applicant will receive a written reply. The letter will explain the selection process in more detail and let you know if an interview is necessary. Final selections will be made by the end of May.

If you have any questions, please contact David Jones at (231) 348-5820 djones@phsacf.org



RECOMMENDATION FOR MEMBERSHIP TO THE YOUTH ADVISORY COMMITTEE

Applicant Name _____

Dear Community Member:

The above-named youth is applying to become a member of the Petoskey-Harbor Springs Area Community Foundation's Youth Advisory Committee. The Youth Advisory Committee (YAC) has approximately 25 Emmet County youth from 8th to 12th grades. The YAC promotes philanthropy and active citizenship among youth in the Emmet County area. Responsibilities of YAC membership include important decision making regarding the distribution of grant dollars to youth serving nonprofit organizations, working well in a group, expressing opinions, and attending monthly meetings from September to May.

We appreciate your help in our selection process. Please evaluate this young person, particularly her/his sensitivity and tolerance, concern for others, potential for leadership, communication skills, energy, and sense of responsibility. Include specific examples if appropriate. Please keep recommendation to one page, written or typed single spaced. Thank you!

THIS RECOMMENDATION IS DUE AT THE COMMUNITY FOUNDATION OFFICE BY 5PM FRIDAY, MAY 1, 2009.

You may return your letter of recommendation to the applicant in plenty of time to submit to us, or you may mail it directly to us:

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Youth Advisory Committee
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