

Fremont Interagency Oversight Group Youth Advisory Council

What is the Youth Advisory Council?

The council is a group of young adults from Fremont County. The council gives input on how the programs and services of the community can benefit young people. The council represents:

- Diverse ideas
- Youth from different cultural backgrounds
- Students from public, private, and alternative schools (including home schools and college level)

What does the Youth Advisory Council do?

As a group, the council meets with representatives of local agencies to learn about programs and to offer suggestions on ways these programs may better serve the youth of Fremont County. Council members are asked to:

- Explore issues
- Get the facts, discuss, and share ideas
- Provide recommendations and solutions

Who should consider becoming part of the Youth Advisory Council?

- Youth in grades 7 – 12 (12 to 20 years old) who would like to use their experience and know-how to improve community provided services and programs
- Youth who would like to gain leadership experience
- Those who are ready to meet new people and make a positive difference in the lives of others

How can you become a part of the Youth Advisory Council?

- Fill out and submit an application
- Complete an interview
- Attend meetings and be a part of the council

As the community invests in members of the Youth Advisory Council we require:

- Commitment
- Exemplary behavior
- Willingness to make a difference

Why should I join?

- Represent your community
- Learn to be a community leader
- Advise community organizations
- Enhance your work or academic resume
- Host youth and community wide events

Fremont Interagency Oversight Group Youth Advisory Council Application Form

The youth advisory council seeks to foster, develop and support youth initiative, and make available for a strong youth voice in the service and decision-making life of our community, and to engage youth as resources.

Date: _____

Name: _____ Age _____

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

Home phone: _____ Cell phone: _____

E-mail: _____ Gender: Male ___ Female ___ Birthday _____

School: _____ what grade are you in? _____

Parent/Guardian Name: _____

Work number: _____ Home number: _____

Cell number: _____ E-mail address: _____

School and community activities you have participated in

Please answer the following questions (attach additional pages as necessary):

1. Why would you like to be on the Youth Advisory Council?

2. List your interests & activities (hobbies, organizations, clubs, sports, etc)

3. What do you see as the role of youth in our society and how would you like that to change in the future?

4. What would you change in your community or school if you had the power to do so?

5. What is the most important issue facing the youth of Fremont County? How would you use your experience as a YAC member to affect this issue?

6. What skills can you offer the YAC?

7. Do you have any time commitments that may keep you from participating in meetings? If so, what are they?

Youth Advisory Council Eligibility Requirements

1. Council members must remain out of trouble
2. Council members must maintain a minimum 2.0 GPA and be passing all of their classes
3. At times you may have to miss school to attend meetings so applicants must be able to miss some school.
4. Meetings are a priority. Council members are expected to be on time and must be able to attend at least 75% of the meetings.
5. It is important that council members be respectful of all other members and people they come in contact with while representing the Youth Advisory Council.

In addition to these requirements, we are also looking for students who...

- Have leadership skills or have the willingness to learn leadership skills through participation in the Youth Advisory Council
- Are responsible (ex. Notify your advisor if you will miss a meeting or event)
- Are productive: Council members are expected to participate during meetings

I understand that membership in the Youth Advisory Council is a privilege and responsibility. I agree to participate to the best of my ability by attending meetings and contributing my time and talents to this council. I understand that I will be expected to contribute approximately 4-6 hours a month in performing my duties.

Applicant

Parent or guardian

References: List at least one adult (not a relative) and one of your fellow students who can tell us more about you

Name: _____ Phone: _____

How does she/he know you? _____

Name: _____ Phone: _____

How does she/he know you? _____

Name: _____ Phone: _____

How does she/he know you? _____

Emergency Contact Information

Name: _____ Relationship to Applicant: _____

Daytime Phone: _____ Evening Phone: _____

Fremont Interagency Oversight Group
Youth Advisory Council
Parental Permission Form

Student Name: _____

Your student, listed above is asking to be considered for a position on the Fremont Interagency Oversight Group Youth Advisory Council in Fremont County. This organization is composed of motivated young adults from all areas of Fremont County who wish to serve the community by providing a youth's perspective on important issues and giving the Interagency Oversight Group and schools on how community service programs can benefit young people. The youth council represents diverse ideas, youth from different cultural backgrounds, and students from private and alternative schools.

As a group, the council meets to offer suggestions on ways that community service agencies may better serve the youth of Fremont County.

All meetings and activities will be chaperoned by responsible adults who will give guidance and ensure that students learn how to conduct meetings, consider alternate points of view, gather information, and present solutions. The students will be expected to participate in activities on some weekends and evenings.

Activities may include, but not limited to the following:

- Monthly meetings in Canon City
- Driving or riding with other adults or students to a monthly meeting or activity
- Presentations at the monthly Fremont Interagency Oversight Group
- Communication with your son/daughter through phone calls and/or text messaging
- Activities outside of Fremont County will require a separate signed permission slip

Can you support your student in seeking a position on the Youth Advisory Council?	Yes	No
May your student attend meetings in the evening (ending no later than 8:00 pm)?	Yes	No
May your student attend meetings on some Saturdays?	Yes	No
May your student drive him or herself to meetings?	Yes	No
May your student drive others to meetings in a vehicle?	Yes	No
Does your student have any restrictions?	Yes	No

If yes, please explain: _____

I, _____ give permission for my child,
_____ to attend meetings and activities as part of the Fremont Interagency Oversight Group Youth Advisory Council for the 2010 –2011 term. This includes activities and meetings within Fremont County.

Parent Last Name _____ First Name _____

Phone _____ Alternative Phone _____

Other Emergency contact _____

Signed: _____

Relationship to child _____