



Mayor's Youth Leadership Council Application

Date _____

Applicant's Name _____
First Last M.I.

Address _____
Street City State Zip Code

Telephone Number (____) _____ Email _____

Male Female Date of Birth ____/____/____

White (not of Hispanic origin) Black (not of Hispanic origin) Hispanic
 American Indian/Alaskan Native Asian/Pacific Islander Other _____

Have you ever pled "guilty" or "no contest" to, or been convicted of, a crime? Yes No

If yes, please provide date(s) and details _____

Please provide three references, including at least one from an organization in Papillion (references may not be family members or MYLC sponsors):

1. _____
Name Organization Address/Phone Number

2. _____
Name Organization Address/Phone Number

3. _____
Name Organization Address/Phone Number

Please list all school, community, church, sports and any other organizations you participate in or volunteer for.

Please list the one of the most important issues in your neighborhood you would want to focus on.

Write a brief explanation of how you can address the concern listed above effectively with Papillion agencies and residents.

Write a brief explanation of the your experience and involvement in the community or school that has prepared you for representing your neighborhood in facilitating meetings, listening to the concerns of peers, communicating information about youth programs, working to develop innovative solutions and meeting with community leaders.

How will you demonstrate commitment to working with partners, visiting youth agencies, attending citywide meetings, conducting neighborhood meetings, and carrying out other responsibilities of council membership?

Signature of Applicant

Date

Parental or Guardian's permission to apply for the Mayor's Youth Leadership Council:

Parent or Guardian Name (Please Print)

Parent or Guardian Signature

Date