

## MAYOR'S YOUTH ADVISORY COUNCIL

## 2018/2019 Term Application Form- Due August 24<sup>th</sup>, 2018

Thank you for your interest in serving on the Mayor's Youth Advisory Council (MYAC). Your participation will help give youth a voice in our City!

Our goals include:

- To continue work on projects initiated by the previous Council
- Educate youth in our community about MYAC
- > To act as a positive advocate for youth in our community
- > To support events created by the MYAC that relate to the mandate
- Administer the Youth Initiatives Fund

Before you begin, pleases note.....

- Members must be 14 to 24 years of age and residents of the City of Sault Ste. Marie and enrolled in a Secondary or Post Secondary School.
- > The council term runs from September to June
- > Meetings will be held once a month in the evenings or after school at municipal facilities
- Additional opportunities may be available to volunteer and/or take on additional tasks, and may require additional time
- > Involvement in the MYAC is eligible for community volunteer hours
- Members under the age of 18 years must include a parent's signature of consent on application

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## Personal Information

Name:		
Address:		
City: Sault Ste. Marie Postal Code:		
Home:	_Cell:	
Email: (email will be used to distribute meeting agendas and information		
School Name:		_Grade:

Please take the time to answer the following thoughtfully. Your answers will allow us to get to know you better. Please feel free to attach a CV or letter detailing your experience and why you would like to be on the MYAC.

1. Please explain why you are interested in joining the MYAC.

- 2. What talents, skills and abilities can you share that would benefit the MYAC?
- 3. Teamwork is an important value to the MYAC. What actions would you take during a MYAC meeting if you observed that not everyone was feeling included?

4. In your opinion, what is the biggest challenge facing youth in Sault Ste. Marie today?

Parental Conser	nt		
I,	, the parent/guardian of		_ am aware of the
applicant's interes	st in becoming a member of the Mayor's Yo	outh Advisory Council.	
Name of parent/guardian: Date:			
Telephone number of parent/guardian: Home: Cell:			
<b>e</b> .	nt/guardian:		
Please return to:	Rick Borean, Supervisor of Community Ser Community Development and Enterprise S 99 Foster Drive, Sault Ste. Marie, ON, P6A Email: r.borean@cityssm.on.ca Questions? Please phone Rick @ 705-759	vices, ervices 5N1	