



MAYOR'S YOUTH ADVISORY COUNCIL

2017/2018 Term

Application Form- **Due August 18th, 2017**

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 for the 2017/2018 term 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, please note.....

- Members must be 14 to 21 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

Personal Information

Name: _____

Address: _____

City: Sault Ste. Marie Postal Code: _____

Home: _____ Cell: _____

Email: _____

(email will be used to distribute meeting agendas and information sharing)

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 Consent

I, _____, the parent/guardian of _____ am aware of the applicant's interest in becoming a member of the Mayor's Youth Advisory Council.

Name of parent/guardian: _____ Date: _____

Telephone number of parent/guardian: Home: _____ Cell: _____

Signature of parent/guardian: _____

Please return to: Rick Borean, Supervisor of Community Services
Community Development and Enterprise Services
99 Foster Drive, Sault Ste. Marie, ON, P6A 5X6
Email: r.borean@cityssm.on.ca
Questions? Please phone Rick @ 705-759-5312