



SAULT STE. MARIE



MAYOR'S YOUTH ADVISORY COUNCIL

**2023/24 Term
Application Form**

Due: November 24

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:

- 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 24 years of age and residents of the City of Sault Ste. Marie;
- 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;
- MYAC is an inclusive council and accommodation is available in accordance with the Ontario Human Rights Code and the Accessibility for Ontarians with Disabilities.

Personal Information

Name:

Address:

City:

Postal Code:

Home Phone #:

Cell Phone#:

Email:

School Name:

Grade:

MAYOR'S YOUTH ADVISORY COUNCIL
Application Form (continued)

Please take the time to answer the following questions thoughtfully. Your answers will allow us to get to know you better. Please feel free to attach a resume 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 youth face 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: Drew Johnson, Events Assistant
Community Development and Enterprise Services
99 Foster Drive, Sault Ste. Marie, ON, P6A 5X6
Email: myac@cityssm.on.ca Phone #: 705-759-5489