



## Youth Advisory Committee Application Form

### General information (please print)

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Home address: \_\_\_\_\_  
(Number & Street) (City) (State) (Zip)

Home phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_ Sex: Male\_\_\_\_ Female\_\_\_\_

Parent(s)/Guardian(s) name(s): \_\_\_\_\_

School: \_\_\_\_\_ Year of graduation: \_\_\_\_\_

School and community activities/Organizations and leadership positions:

---

---

Community service/Organizations and leadership positions:

---

---

In a 100 word essay please discuss why would you like to serve on the Youth Advisory Committee and what you will bring to the YAC?

---

---

---

---

---

---

---

ADDITIONAL COMMENTS FOR THE ABOVE MAY BE WRITTEN ON THE BACK OF THIS SHEET.

Requirements:

1. A personal letter of recommendation using the form below (i.e. from a teacher, counselor, employer, minister/rabbi/priest, etc.).
  2. A short interview with current Youth Advisory Committee members will be held. A letter explaining this process will be sent to you upon receipt of this completed application. This interview is required so please make sure you are available.
- 

PLEASE RETURN TO:

Community Foundation for Delta County  
Youth Advisory Committee  
Attention: Diana Clark  
2420 1<sup>st</sup> Avenue South, Suite 101  
Escanaba, MI 49829  
906-786-6654

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

RECOMMENDATION FOR APPLICATION TO YOUTH ADVISORY COMMITTEE

Applicant Name \_\_\_\_\_

The above-named student is applying to the Community Foundation For Delta County Youth Advisory Committee. The Youth Advisory Committee promotes volunteerism and philanthropy among youth in the Delta County area. Each year, the YAC awards grants to youth serving agencies. We would greatly appreciate your help in our selection process. Please evaluate this student, particularly her/his sensitivity and tolerance, concern for others, potential for leadership, energy, and sense of responsibility. Include specific examples if appropriate. PLEASE RETURN THIS RECOMMENDATION TO THE COMMUNITY FOUNDATION OFFICE. THE MAILING ADDRESS:

Community Foundation For Delta County  
2420 1<sup>st</sup> Avenue South, Suite 101  
Escanaba, MI 49829

If you have any questions, please contact, David Radloff at 786-3032 (work number).