



CITIZENS FOR A BETTER CITY

Youth Representatives Initiative Application 2024-2025

ONLY STUDENTS CURRENTLY ENROLLED IN GRADES 9 THROUGH 11 ARE ELIGIBLE TO APPLY

Please print legibly

Name _____

Parent/Guardian Name _____

Address _____

Email _____ Mobile Phone _____

Parent Email _____ Parent Mobile Phone _____

School Currently Attending _____ Current Grade _____ Graduation Year _____

City Boards & Commissions you are interested in becoming a Youth Rep to:

- | | |
|---|--|
| <input type="checkbox"/> Architectural Advisory Board | <input type="checkbox"/> Housing Commission |
| <input type="checkbox"/> Economic Development Authority | <input type="checkbox"/> Human Services Advisory Council |
| <input type="checkbox"/> Environmental Services Council | <input type="checkbox"/> Library Board |
| <input type="checkbox"/> Falls Church Electoral Board | <input type="checkbox"/> Recreation & Parks |
| <input type="checkbox"/> Historical Commission | |

Civic Groups you are interested in becoming a Youth Rep to:

- | | |
|---|---|
| <input type="checkbox"/> Creative Cauldron | <input type="checkbox"/> Falls Church Lion's Club |
| <input type="checkbox"/> FC Chamber of Commerce
(Mtgs: 2nd Tues 8 -9 AM) | <input type="checkbox"/> League of Women Voters |
| <input type="checkbox"/> Falls Church Democratic Party | <input type="checkbox"/> MHS PTSA |
| <input type="checkbox"/> Falls Church Education Foundation | <input type="checkbox"/> Tinner Hill Social Justice Committee |
| | <input type="checkbox"/> Welcoming Falls Church |

Signature of School Principal _____ Date _____

Parent/Guardian Signature _____ Date _____

Your Signature _____ Date _____

Please print, fill out, sign, get signatures, scan & submit your application, including the photo release, **by Fri, April 5, 2024** via email to: CBCyouthreps@gmail.com or drop off a hard copy in the MHS Counseling Office. Interviews will be scheduled Thurs, May 2 – Mon, May 6, 2024. You will be contacted accordingly.

For more info, please visit <https://www.youthrepsinitiative.net/>

PLEASE NOTE, PROGRAM REQUIREMENTS:

- Your regular attendance is required at your board, commission or civic group meeting. Your appointment will be rescinded if you cannot make this commitment. Absences due to illness or conflicts will be excused if you contact your chairman.
- You will be expected to respond to all Schoology announcements and questionnaires and/or texts or emails. This is a critical component of the program.
- You will be expected to attend:
 - The Youth Rep Training Program – DATE TO BE DETERMINED
 - The City Council swearing-in ceremony at City Hall Council Chambers at 7:30 PM on Monday, May 28th
 - Periodic check-ins, scheduled by the Youth Representative Committee and publicized through Schoology.
- All terms will be two-year terms unless you enter the program as a senior
- A short essay, one page or less, describing your experiences as a youth representative, is required for each year of service.

NAME OF BOARD/COMMISSION/CIVIC GROUP/S:

Please indicate your first, second, and third choice as vacancies are limited.

First Choice _____ Second _____ Third _____

Please provide answers to the following questions. Be specific and cite any relevant experience, classes, and interests. For each Board, Commission, Committee or Civic Group for which you are applying provide these answers on a separate sheet of paper. Additionally, please include on each separate sheet, your name and indicate whether the group is your first, second, or third choice. Please print out and attach these sheets to this application.

- 1) What are the purpose, goals, meeting times, and activities of the Board/Commission/Civic Group that you are interested in becoming a Youth Rep to?
- 2) Why would you like to be a Youth Rep to the Board, Commission or Civic Group to which you have applied?
- 3) How will you contribute to the work of this organization if appointed?
- 4) What do you hope to gain from this experience?
- 5) What impact do you believe you will have on your community as a result of this experience?
- 6) Do you have any family or other relationship with a member of the City Council, City staff, City Board or Commission, or Civic Group? *(Answering affirmatively will not disqualify you but is important to disclose to ensure transparency.)*

Name _____

Photo Release Form for Participants under 18

Citizens for a Better City Youth Representatives Committee has my permission to use my child's photograph publically to promote the Youth Representatives Program. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: _____ Date _____

Parent/Guardian's Name: _____

Child's Name: _____

Phone Number: _____

Name _____