



Return To: CJ Armstrong, SJC Youth Council, involvedgirl@gmail.com
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South Jordan Youth Council Application 2019-2020

Eligibility: You must be a South Jordan resident between the ages of 14 – 18 years and attending 9th, 10th, 11th, or 12th grade during your 2019-2020 participation.

Grade you will be in during the 2019-2020 school year?	How did you hear about South Jordan Youth Council? [Check a box below] <input type="checkbox"/> From another Youth Council member. <input type="checkbox"/> South Jordan Website <input type="checkbox"/> School <input type="checkbox"/> Facebook <input type="checkbox"/> Family <input type="checkbox"/> Other: _____	Date of Application:
School you will be attending during the 2019-2020 school year?		What is your T-shirt size:

Name (Last, First, Middle) _____

Mailing Address (Street or P.O. Box)	City	State	Zip Code
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E-Mail Address:	Home Phone:	Mobile Phone:
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Do you have a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No DL # _____	Do you have your own transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Parent/Guardian: Will you be able to help drive Youth Council members occasionally to activities or service projects? Yes <input type="checkbox"/> No <input type="checkbox"/>
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EMERGENCY CONTACT(S)

Name	Telephone Number	Address	Relationship

APPLICANT CERTIFICATION

I understand that participation in South Jordan Youth Council is voluntary; however, the Youth Council advisor(s) may disqualify or dismiss me from the council if I am unable to demonstrate regular commitment to Youth Council by attending meetings, participating in service projects, volunteering for City special events (e.g., SoJo Summerfest, Light the Night, etc.), and/or checking email for Youth Council announcements. I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE, AND THAT ANY MISSTATEMENT OR OMISSION OF MATERIAL MAY SUBJECT ME TO DISQUALIFICATION OR DISMISSAL.

Applicant Signature: _____ Date: _____

Parent/Guardian Approval to Participate in South Jordan Youth Council 2019-2020

I hereby give permission for my son/daughter/ward to participate in South Jordan Youth Council 2019-2020. _____ Initial I give permission for adult advisors to make any necessary emergency decisions during my child's participation and assume full responsibility and liability for any and all expenses, damage, accident, illness, injury or medical expense of, and to, my child or property resulting from such participation. _____ Initial

I accept that my child may be included in photos/videos from Youth Council-related events that may be used to promote the Youth Council program and/or the City of South Jordan. _____ Initial

Parent/Guardian Signature: _____ Date: _____

South Jordan Youth Council has been a success due to all the support we receive from the parents of council members. Would you or another adult family member be interested in helping as a Youth Council advisor this year? Yes No
 I will be willing to help as an advisor to the South Jordan Youth Council:

Print Name: _____ Phone: _____

SOUTH JORDAN CITY YOUTH COUNCIL APPLICATION 2019-2020

1. Why would you like to be a member of South Jordan Youth Council?

2. Why are you interested in learning about government in your city, state, and at the national-level?

3. What volunteer services have you participated in?

4. What are your plans for extracurricular activities in the coming school year?

5. Will you be able to commit to attendance of Youth Council meetings twice each month? Our meetings are generally held on Thursdays from 7:00 p.m. – 8:00 p.m.
Yes No

6. Will you be able to commit to participate in service opportunities monthly (usually September to May) and occasionally during the summer? Yes No

7. Will you be available to volunteer for the City's annual SoJo Summerfest event (usually the first weekend in June)? Yes No

8. Are you willing and able to check your emails weekly in order to track Youth Council announcements? Yes No

9. Will you be willing to attend a South Jordan City Council meeting once per quarter? Yes No

Service Project Proposal: Please suggest a service project the South Jordan Youth Council could do to benefit members of our city or county. Outline the steps necessary to plan and carry out this project.

