APPLICATION
YOUTH ADVISORY COMMISSION APPLICATION

Auburn area residents are eligible to apply for appointment to the Youth Advisory Commission that has been established by the City Council.

Name: _____

Mailing Address: _____

Phone: _____ _____
(Home) (Work)

Email: _____

Profession: Please Circle: Student Adult Youth Advocate

Sponsoring School or Organization _____

Qualifications: (current leadership/other activities)

_____

What Areas do you feel are of most importance to youth:

_____

Recommendation: (School Official/Mentor)

Contact # _____

_____

I understand that I may be removed from office if I fail to attend three or more meetings in a twelve month period without prior excuse from the Chair.

_____
Signature of Applicant

_____

Extensive answers to the above are not a necessity. However, should you like to add additional information, you may write on the reverse of the application or attach an additional sheet of paper.

Return the completed form to: Auburn City Hall
c/o City Clerk's Office
1225 Lincoln Way, Room 8
Auburn, CA 95603
530/823-4211, Ext. 112

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