

Application for Youth Advisory Council Membership

Name:		
Home Address:		Email:
Home Phone:	Cell Phone:	Work Phone (if applicable):
Reliable Means of Transportation (Circle) Yes / No		Are you available on weekends?
Age:	Grade:	School:

Are you currently employed? If so, where do you work and what is your schedule?

Have you had any experiences with our organization in the past? If so, please describe.

Why are you interested in working with our organization?

Are you involved in other extracurricular activities? If so, please describe.

Please describe yourself in three words.

How experienced are you in the following areas?	very experienced	somewhat experienced	little or no experience
Planning and organizing (events and/or programs)			
Fundraising			
Board development (recruitment, training, evaluation)			
Budgeting			
Advocacy			
Participation on committees			
Public speaking			
Information technology			
Writing, journalism			
Peer support			

References: List at least one adult (not a relative) from your community, from school, or from work who can tell us more about you.	
Name:	Phone:
How does he/she know you?	How long has he/she known you?
Name:	Phone:
How does he/she know you?	How long has he/she known you?

Mail, e-mail or fax completed application to:

Jenah Cason
 Youth Outreach Coordinator
 Federation of Families of SC
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 Columbia, SC 29210
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 866-799-0402 (toll free)
 803-772-5212