

**Alpine Youth Council Application 2018-2019**

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| NAME  | SCHOOL ATTENDING NEXT YEAR  |
| ADDRESS  |
| EMAIL | Place an X next to the grade you will be in NEXT YEAR:SOPHOMORE JUNIOR SENIOR |
| HOMEPHONE  |  | CELL |
| Are you employed? YES NO  | How many hours per week on average?  |
| School/Community activities in which you are involved: (If you are running for your school’s student council for the 2018-2019 school year, you are welcome to apply for AYC; however, if you make it on student council, you will not be considered for AYC.) |
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| PARENT(S) NAMES |
| PARENT(S) EMAIL | CELL |

Do you have any ideas that the council could use next year for improving Alpine and being of service to our community?

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| 1. |
| 2. |
| 3. |

AYC is run by parent volunteers. We need parents to help throughout the year with various activities. If your parent is available to help, please put his/her name below.

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| PARENT’S NAME  | PHONE NO. |

STUDENT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please type your name to indicate your electronic signature and have your parents do the same. Save this document with YOUR NAME as the file name and email it to alpineut@gmail.com. If you have a problem completing this form electronically, please print it, fill it out, then scan and email it to alpineut@gmail.com. Please also email your Letters of Recommendation to the same email address. If you have any questions, contact Amy Lundquist at (801)756-1811.

**FOR AYC OFFICIAL USE ONLY**

Date Received Notified Interview

City Council Meeting Service Project AYC Meeting