

**Chase Youth Commission
Youth Commissioner Application**

First Name

Last Name

Date of Birth

Home Street Address

City

State

Zip Code

Grade in Fall 2017

Home Phone

Cell Phone

Email Address

Facebook Name

High School Name

How did you hear about the Chase Youth Commission?

Please answer each of the following questions in 1-2 paragraphs on a separate sheet:

1. What do you hope to gain from being on the Chase Youth Commission?
2. What experience have you had that would help you make a contribution to the Commission?
3. Please list the activities you are currently involved in, including sports, music, theater, job, etc. Explain how you would fit the Chase Youth Commission meetings and activities into your schedule.
4. Why do you believe you should be selected as a member of the Chase Youth Commission?

References

Please provide two (2) references with your application. Reference forms are available on CYC website. References must be 21 years of age or older and non-family members.

Statement of Commitment

If selected, I agree to attend scheduled meetings and be an active participant in all activities and events. I am aware that this is a full school year commitment. I understand that lack of active participation greatly diminishes the Chase Youth Commission programs. I will make my best effort to obtain materials from the appropriate person, and continue my support when I have missed a meeting.

Signature of Applicant

Date

Please return your completed application packet to the Chase Youth Commission by June 15, 2017.

Meeting days and times for 2015 – 2016 school year:

1st Tuesday of Each Month 6:00 – 7:30 Spokane City Hall Conference Room 3B

3rd Tuesday of Each Month 6:00 – 7:30 Spokane City Hall Conference Room 3B

Mail completed application and reference forms to:

**Chase Youth Foundation
Susan Lane, Executive Director
10 N. Post Street, Suite 649
Spokane, WA 99201**