



**City of Manitowoc Mayor's Youth Action Council  
Application Form**

**Deadline: September 30<sup>th</sup>, 2020**

Name \_\_\_\_\_ Phone \_\_\_\_\_

School \_\_\_\_\_ Grade  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>

Mailing Address \_\_\_\_\_ City and Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Contact Pref.  Social Media  Text  Email

Preferred Social Media Platform to be contacted on \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Alt. Parent/Guardian \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Email Address(es) \_\_\_\_\_

List any standing scheduling conflicts & specify by season

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**A: Answer the following question: (please attach answers to this question on a separate page.)**

In your opinion, what is the most critical problem facing youth in your school, in your neighborhood, and/or in your City? What can a Youth Action Council do to solve such a problem?

**B: Choose two of the first three questions and answer: (please attach answers to this question on a separate page.)**

1. What opportunities for improvement do you see in the Manitowoc area?
2. Describe one thing you would change about our community, if you could?
3. How would you describe Manitowoc to someone who was not from around here?
4. What's your favorite Starburst color? (Answer required)



**Mayor's Youth Action Council**  
**City of Manitowoc**

Dear Parent:

We encourage your child to apply for the City of Manitowoc Mayor's Youth Action Council. The purposes of the Mayor's Youth Action Council are:

1. To familiarize, orientate, and involve youth with the various functions of City government. With these experiences come opportunities for students to see first-hand how City departments and officials carry out their duties and responsibilities, i.e. they will see and experience democracy in action;
2. To provide opportunities for Youth Action Council member to identify, select, and carry out community service projects that improve the quality of life for residents;
3. To provide opportunities for Youth Action Council members to build skills and gain awareness in areas related to professional development. i.e. resume building, interviewing, public service, and public speaking; and
4. To have fun while learning about and making a difference in Manitowoc!

Information provided on the application will be held in confidence. Applicants selected to serve on the City of Manitowoc Mayor's Youth Action Council will be notified in writing. By signing this application, the applicant and parent/guardian acknowledge that he/she understands the requirements stated therein, including attendance policies.

### **Transportation**

Please check the appropriate circle:

- Yes, my child may drive or ride with another student or advisor
- No, my child may not drive or ride with another student or advisor

### **Parent/Legal Guardian**

I hereby grant my permission for the student named on the application to apply for the City of Manitowoc Mayor's Youth Action Council, and if selected, to participate in the program:

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



**Mayor's Youth Action Council**  
**City of Manitowoc**

### **Attendance Policy**

- The Mayor's Youth Action Council is set to meet a minimum of once every month September – August.
- The success of this program depends on the commitment of each member to attend meetings on a regular and punctual basis, except for excused absences, i.e. sickness, school functions (band, athletic membership, cheerleading), and/or family vacation.
- Transportation is the responsibility of each Youth Action Council member and cannot be excused except in unusual and/or emergency situations.

### **References**

Give at least one Reference Form to a reference of your choice, i.e. principal, coach, counselor, employer or manager, teacher, family friend, or faith leader.

Please submit completed reference forms with your application by email to [myac@manitowoc.org](mailto:myac@manitowoc.org) or mail to:

City of Manitowoc  
Attn: Mayor's Office  
900 Quay Street  
Manitowoc, WI 54220

### **Checklist:**

- \_\_\_\_\_ Application completed and signed by applicant
- \_\_\_\_\_ Parental permission signed by parent/legal guardian
- \_\_\_\_\_ Reference form(s) submitted



**Mayor's Youth Action Council**  
**City of Manitowoc**

## City of Manitowoc Mayor's Youth Action Council Reference Form

Name of Applicant \_\_\_\_\_

Thank you for agreeing to submit a reference for the applicant. The Mayor's Youth Council consists of 10-12 participants from ninth through twelfth grades. The Mayor's Office aspires to encourage students from diverse backgrounds and leadership abilities to apply, particularly those who could benefit personally and grow with the program. The objectives of the Mayor's Youth Action Council are as follows:

- To familiarize, orientate and involve youth with the various functions of City government. With these experiences come opportunities for students to see first-hand how City departments and officials carry out their duties and responsibilities, i.e. they will see and experience democracy in action;
- To provide opportunities for Youth Action Council members to identify, select, and carry out community service projects that improve the quality of life for residents;
- To provide opportunities for Youth Action Council members to build skills and gain awareness in areas related to professional development (i.e. resume building, interviewing, public service, and public speaking).
- To have fun while learning about and making a difference in Manitowoc!

Name of Reference \_\_\_\_\_ Phone \_\_\_\_\_

Organization/Affiliation \_\_\_\_\_

1. For how long, and in what capacity, have you known the applicant?
2. What do you consider the applicant's primary interests, talents, and strengths?
3. Describe the applicant's relationships with peers.
4. In what way has the applicant shown interest in making the community a better place?

\_\_\_\_\_  
Signature of Reference

\_\_\_\_\_  
Date