

Barstow Youth Advisory Council



Office of the City Clerk

"Youth advocating youth with integrity and purpose, empowered with the voice to shape the course of things to come."

Barstow Youth Advisory Council Application

Name: _____ Age _____

Home address: _____
(Number & Street) (City) (State) (Zip)

Home phone: _____ Cell phone: _____

E-mail: _____ Gender: Male _____ Female _____ Birthday _____

School: _____ Grade _____

School and community activities/Organizations and leadership positions:

Community service/Organizations and leadership positions:

Essay Questions Please answer the following questions in essay format. We want to hear from you, so please tell us as much as you can. If you need additional space, be sure to clearly number the question you are answering and staple the supplementary paper to this form. **All answers should be typewritten.**

1. Why would you like to be a member on the Barstow Youth Advisory Council?

2. Please describe what you believe to be the fundamental qualities of a good leader.

City Hall • 220 E. Mountain View St. • Barstow, CA 92311
Phone 760-256-3531 • Fax 760-256-1750 • jcousino@barstowca.org

3. What is one of the biggest issues you feel youth face in Barstow or in your neighborhood? Discuss in detail how you would advise the Mayor and City Council to address that need.

4. Do you have any experience working on projects to improve your community or speaking out on youth? or community issues? If so, please describe your experience.

6. The Barstow Youth Advisory Council requires a commitment of time and energy and a minimum of 16 hours per month. Please list any responsibilities and/or activities that you will be involved in during the next school year.

Additional Requirement:

1. A personal letter of recommendation from a teacher, counselor, employer, minister or family friend. Please use the format on the following page. The letter should be mailed directly to the City Clerk's office by the evaluator.
2. A certification of a 2.5 or better GPA will need to be submitted before you become a qualified candidate for consideration of appointment. This certification will need to be updated quarterly.
3. There will be a mandatory orientation and training for all selected youth council members. The date and time of the orientation is to be announced.

Appointment to the Barstow Youth Advisory Council is a two-step process: application and personal interview. If your application passes the standards of the Screening Committee, you will receive a letter apprising you of your interview date, time, and location. A member of the current Barstow Youth Advisory Council, Mayor Joe D. Gomez and one or more members of City Council will conduct the oral interview.

NOTE: Applicants must live in the City of Barstow.

Student Signature _____ Date _____

Parent/Guardian _____ Date _____

