



New Rochelle  
Youth Bureau

Youth Council  
**Youth Council**

2019

*Membership Application*

Please print or type

Name \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Tel. # \_\_\_\_\_

Cell. #: \_\_\_\_\_

Email: \_\_\_\_\_

Male

Female

School:

IEYMS

New Rochelle High School

ALMS

other: \_\_\_\_\_

PLEASE SUBMIT WITH THIS APPLICATION FORM:

- 1) In a 250 word essay, explain why you want to become a member of the Youth Council (one double - spaced page). Include any/all community services or extra-curricular involvement.
- 2) Please submit two (2) letters of reference with application from any two (2) of the following: Teacher, Clergy, Guidance Counselor, Employer, Coach etc..

Please mail completed application and required material to:

Sam Gomez, Advisor  
New Rochelle Youth Bureau  
515 North Avenue  
New Rochelle, NY 10801

**\*\*Reminder\*\***

Incomplete applications will not be considered.

***APPLICATION DEADLINE: FRIDAY, March 1, 2019***

All applications will be reviewed by the Advisor and Youth Council Officers. All applicants must be New Rochelle residents in grades 8<sup>th</sup>- 11<sup>th</sup>. Interviews will be conducted shortly after the application deadline.