

Lowell City Youth Council Membership Application

Mission Statement – *As a youth council we aim to reach out to community members and educate them on current issues pertaining to society. We hope to have the support of city and government officials to have our voices acknowledged when creating legislation, that would affect our community.*

<u>Name:</u>	
<u>Address:</u>	<u>City:</u>
<u>Age:</u>	<u>State:</u>
<u>Gender:</u>	<u>Ethnicity (optional):</u>
<u>School (if applicable):</u>	
<u>Cell Phone Number:</u>	
<u>Email Address:</u>	

Qualifications You Need:

- ✓ **Positive Attitude**
- ✓ **Passionate about making change**
- ✓ **Civic knowledge**
- ✓ **Dedication**
- ✓ **Good communication and cooperation**

1. Why do you think that it is important to have a youth council in the city of Lowell?

2. What do you feel are some of the major problems facing our city right now?

3. If you could make one change in the city, what would it be?

WORK & VOLUNTEER EXPERIENCE (*Please attach resume*):

Special Training/Skills: _____

REFERENCES:

1. **Name/Relationship:** _____
Telephone: _____
2. **Name/Relationship:** _____
Telephone: _____
3. **Name/Relationship:** _____
Telephone: _____

**PLEASE RETURN THIS TO YOUR SCHOOL'S STUDENT ACTIVITIES
DIRECTOR OR TO THE RECREATION OFFICE IN CITY HALL (GROUND
FLOOR) BY 5PM.**

**IF YOU HAVE ANY QUESTIONS PLEASE CALL MONICA VETH AT (978)
337-4572**

THANK YOU.