

Youth Leadership Council Application

Please complete and submit the below application to jwelch@georgia.wish.org by Friday, March 6, 2020

Requirements: Must be a hard-working, dedicated high school student. Must be a member of a school club, organization or extracurricular activity. Must have a committed adult mentor (parent, teacher, counselor). Must be able to attend monthly meetings from September 2020 through April 2021.

PERSONAL INFORMATION			
Applicant's Full Name:			
Home Address:			
Student Cell phone:	Parent Cell phone:		
Student Email Address:	Parent Email Address:		
SCHOOL INFORMATION FOR AUGUST '20 - JUNE '21 SCHOOL YEAR			
Name of School:			
School Address:			
School Telephone:	Grade level:		
APPLICATION QUESTIONS. Feel free to attach additional sheets as needed.			
How did you hear about the Youth Leadership Council (YLC)?			
Please share why you are interested in the YLC to the group.	and what experience and/or skills you will bring		



Do you have any volunteer or fundraising	ng experience? If so, p	ease describe.	
Do you have prior involvement with Ma	ake-A-Wish Georgia? I	so, please describe.	
Are you able to attend monthly meeting	gs between Sep. 2020-	May 2021? Yes N	lo
PARENTAL / LEGAL GUARDIAN PE	ERMISSION:		
I have reviewed the above application a of the YLC members.	and the YLC Info Sheet	and understand the requirem	ients
Parent/Guardian, Printed Name	Signature	 Date	
Mentor, Printed Name	Signature	Date	
Student, Printed Name	Signature	Date	