



YOUTH ENGAGEMENT COMMITTEE MEMBER APPLICATION FORM

DEPARTMENT OF COMMUNITY SERVICES

PERSONAL INFORMATION: (PLEASE PRINT CLEARLY)

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ HOME PHONE #: _____

_____ CELL PHONE #: _____

City Province Postal Code

EMAIL: _____ BIRTHDATE: _____

SCHOOL: _____ FALL 2019 GRADE: _____

I am between the ages of 12 and 17 (PLEASE CHECK BOX)

I have attached a letter of interest (PLEASE CHECK BOX)

EMERGENCY CONTACT NAME: _____

RELATION TO APPLICANT: _____ CONTACT NUMBER: _____

PREVIOUS RELATED VOLUNTEER/WORK EXPERIENCE:

(BEGINNING WITH THE MOST RECENT AND ATTACH EXTRA SHEET IF NEEDED)

	Organization	From	To	Position Held
1.	_____	_____	_____	_____
		month/year	month/year	
2.	_____	_____	_____	_____
		month/year	month/year	

Other related experience (hobbies, outside activities, courses, workshops, leadership courses, etc.)

I, the undersigned, certify that all information contained within this application is truthful and accurate.

Signature: _____ Date: _____

SIGNATURE (PARENT/GUARDIAN)

Since the applicant is under the age of 18, please sign below to indicate your approval of their involvement with the Town of Aurora Youth Engagement Committee.

Name: _____ Relationship to Applicant: _____

Date: _____

Applications will be accepted until **Wednesday July 31, 2019**.
All applications can be emailed to youth@aurora.ca or
dropped off at:

Town Hall, Community Services Office (3rd Floor)
100 John West Way
Aurora, Ontario, L4G 6J1

ATTENTION: YOUTH PROGRAMMER

Please note that by providing your e-mail address, you are consenting to receive future correspondence (promotional or otherwise) from the Town of Aurora, Parks, Recreation, and Cultural Services Department. All information in this application will be kept confidential.