

Jasper Mayor's Youth Leadership Council Membership Application

Jasper Mayor's Youth Leadership Council Mission

To develop leadership skills and empower students with engaging service opportunities that benefit the Jasper community.

PERSONAL INFORMATION

First Name:	Middle Initial: Last Name:
Home Street Address:	
City:	, Indiana Zip Code:
Phone Number:	Email:
Birthdate (mm/dd/yyyy):	
Parents' or Guardians' Names: _	
EDUCATION INFORMAT ☐ Currently, I am a freshman ☐ Currently, I am a sophomo ☐ Currently, I am a junior at ☐ Currently, I am a senior at	n at Jasper High School ore at Jasper High School Jasper High School
Principal's Name:	School Phone Number:
Guidance counselor's name:	
Extracurricular activities:	
Desired career (optional):	

NAMES OF TWO REFERENCES (CANNOT BE FAMILY MEMBERS) Reference #1: Name: ______ Phone number: _____ Relationship to student applying: Reference #2: Name: ______ Phone number: _____ Relationship to student applying: SUPPLEMENTAL MATERIAL REQUIRED ESSAY QUESTION: Type a one-page response to the following question and attach to the back of your application. What does leadership mean to you? Student's signature Date Parent/guardian's signature Date Thank you for applying!

CITY OF JASPER