

# **City of Auburn Youth Council Application**

Applications are limited to 10 students per school year.

Student's Full Name: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Student's Cell Phone: \_\_\_\_\_

Student's Email Address: \_\_\_\_\_

Emergency Contact(s) Name(s): \_\_\_\_\_

Emergency Contact(s) Number(s): \_\_\_\_\_

## **Release of Liability**

*To the extent allowed by law, the participant hereby voluntarily waives any and all claims, both present and future, arising from his/her participation in the City of Auburn Youth Council program, including but not limited to negligence, property damage, personal injury, and wrongful death. However, nothing herein will be deemed to be a waiver of the City's responsibility for the negligence or willful acts of the City's agents and employees. Further, the participant will indemnify, defend and hold the City harmless from all costs, expenses, liability, claims, actions, causes of action, or damages sustained by reason of any occurrence causing injury or death to any person or damage to property due directly or indirectly to acts or omissions of the participant.*

**Participant:** \_\_\_\_\_  
(Signature) \_\_\_\_\_  
(Date) \_\_\_\_\_

\_\_\_\_\_  
(Full Name Printed)

**Parent/Guardian:** \_\_\_\_\_  
(Signature) \_\_\_\_\_  
(Date) \_\_\_\_\_

\_\_\_\_\_  
(Full Name Printed)

**Name and email of teacher filling out page 3:** \_\_\_\_\_

## **Essay Form**

**1. Explain why you would be a good candidate for the City of Auburn Youth Council:**

## 2. Describe your future career ambitions:

**3. If you were Mayor, describe two areas/attributes of the city you'd improve and how:**

*If more space is needed for your responses, you may use the back of this page.*

## **City of Auburn Youth Council Teacher Recommendation Form**

Teacher: Please email completed recommendation form to [bmcoburn@ci.auburn.in.us](mailto:bmcoburn@ci.auburn.in.us). Students will not be considered for AYC unless this form is completed by a teacher.

**Student's Name:** \_\_\_\_\_

**Teacher's Name:** \_\_\_\_\_

**What subject(s) do you teach?** \_\_\_\_\_

**Which of your classes has the student participated in?** \_\_\_\_\_

**What are the top 3 strengths you believe the student possesses?**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**What is an area of growth you'd recommend the student focus on?** \_\_\_\_\_

**How would the student be an asset to AYC?** \_\_\_\_\_

**Does the student have a high level of integrity?** \_\_\_\_\_

**Does the student show leadership qualities?** \_\_\_\_\_

**Does the student understand basic government principles?** \_\_\_\_\_

**Is the student outspoken in class?** \_\_\_\_\_

**Will the student give their opinion without prompting?** \_\_\_\_\_

**Additional Comments:** \_\_\_\_\_