

## 2009-2010 Brandon Mayor's Youth Council Application

All applications must be legible and turned in no later than August 31st, **2009** to the Mayor's office at Brandon City Hall or mailed to P.O. Box 1539 Brandon, MS 39043. Each application must have 2 letters of recommendation. One from a non-family member in the community and one from a school teacher or principle and a non returnable picture of the applicant. Also include a copy of most recent transcript or report card. The new council will be announced on September 15th 2009. If you have any questions regarding this application, please feel free to contact at 601-825-5021.

Name \_\_\_\_\_ Grade in Fall \_\_\_\_\_

Address \_\_\_\_\_ Age \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Shirt Size \_\_\_\_\_ Birth Date \_\_\_\_\_

Mother \_\_\_\_\_  
(Name) (Address) (Work Phone)

Father \_\_\_\_\_  
(Name) (Address) (Work Phone)

Do you have a conflict with meetings held Monday mornings from 7:15-8:00? \_\_\_\_\_

Are you currently holding and capable of maintaing an accumulative grade point average of 3.0? \_\_\_\_\_

- 1) On a separate sheet, please list community and school activities which you are currently involved in.
- 2) I understand that being a member of the Mayor's Youth Council carries certain responsibilities. I agree to conduct myself as properly befitting a representative of my city.
- 3) I understand that I am to wear my Mayor's Youth Council T-Shirt to ALL Activities.
- 4) I understand that I am required to meet the minimum yearly requirements in order to attend Award Ceremony and to continue membership of the Youth Council. Please see member requirements.

\_\_\_\_\_  
Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian Signature: I give my permission for the above applicant to seek a position on the Mayor's Youth Council and I have read and understand the commitments required for the council.

\_\_\_\_\_  
Parent Signature \_\_\_\_\_ Date \_\_\_\_\_