

## **2022-2023 APPLICATION**

Please mail, email or fax completed applications to:

MAYOR'S OFFICE, ATTN: KAREN L. RICHARDS – Mayor's Youth Engagement Council 200 E. BERRY STREET, 4th Floor, FORT WAYNE, IN 46802

Email: Karen.Richards@cityoffortwayne.org

Fax: 260-427-1115

AN APPLICANT MUST BE A CITY RESIDENT AND ENROLLED AS A SOPHOMORE-SENIOR FOR THE 2022-2023 SCHOOL YEAR.

- Accepting Applications NOW.
- Application deadline is August 22, 2022 with interviews to be scheduled.
- No late applications accepted.
- Application must be completed in blue or black ink (if not typed).
- No phone calls please.
- Finalists must take part in an in-person interview. Interviews will take place sometime in August September.
- The Council will meet twice a month on Tuesdays and subsequently after the holidays, may meet more often due to any upcoming events.
- \*\* PLEASE NOTE: NO INQUIRIES WILL BE ENTERTAINED DURING THE APPLICATION AND SELECTION PROCESS. \*\*

#### **MISSION STATEMENT:**

"To engage the youth of Fort Wayne with their community and local government"

#### **VISION STATEMENT:**

The Mayor's Youth Engagement Council's vision is to be a service-learning group comprised of youth members. The members provide a voice for the youth of Fort Wayne to local government by engaging their peers, creating innovative solutions, and performing service-learning projects.

"The youth of our community are the future of our city. We must not only provide them with an education and caring environment, but a way to create an atmosphere in which they would like to live."

i. Student information	
Name:	Date of Birth:
School:	Grade (Fall 2022):
Home Address:	City/Zip:
Phone: E-Mail:	
PLEASE NOTE: Do you have reliable transportation to attend MY	/EC meetings?YESNo
What is your availability for interviewing if selected? Days	s & Time
PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR ABILITY.	USE A SEPARATE PIECE OF PAPER IF NECESSARY.
What activities or commitments (excluding Mayor's Youth Engageschool hours, during 2022-23? (include employment, voluntee extracurricular activities, etc.)	
What personal skills and characteristics do you possess that w Mayor's Youth Engagement Council?	ould make you a good representative for th
In your opinion, what is our community's most important issue	or concern?

In your opinion, how can City Government a	nd the Community address this issue or concern?
Why do you want to be a part of MYEC and v	what do you wish to accomplish?
•	(name and method of contact). The reference should be someone tho has served as an advisor/leader of a school and/or community een a part of while in high school.
Name:	Phone:
Email (optional)	
Name:	Phone:
Email (optional)	
OF TEAMWORK AND COOPERATION. I AM ABLE TO M HELD TWICE A MONTH ON TUESDAYS STARTING AT	R THE MAYOR'S YOUTH ENGAGEMENT COUNCIL. I ALSO KNOW THE IMPORTANCE MAKE A 12-MONTH COMMITMENT TO THIS COUNCIL. MEETINGS ARE NORMALLY 5:00-7:00 IN CITIZENS SQUARE. ONCE A PROJECT IS SELECTED, YOU MAY BECOMMITTEE MEETING. PLEASE KEEP THIS IN MIND BEFORE SUBMITTING AN
Student Signature:	Date:

#### II. PARENT/GUARDIAN PERMISSION

In consideration of the opportunity for my child to participate in the City of Fort Wayne Mayor's Youth
Engagement Council, I, the undersigned parent (s)/guardian(s) of the minor child,
(hereinafter "Minor Child") do hereby waive all claims, release, indemnify, defend and hold harmless the City
of Fort Wayne and all of its officials, officers, agents, and employees, in both their public and private
capacities, and all other participating sponsors and their employees and agents, for any and all liability, claims
suits, demands, or causes of action, including all expenses of litigation and/or settlement which are related to
or arise by reason of injury to, or death or debt of any person, including but not limited to Minor Child, or for
loss of, damage to, to loss of use of any property arising out of or in connection with the Program(s) related to
or as a result of the act or omission of Minor Child.

In further consideration of Minor Child's participation in the Program(s) described herein, the undersigned agrees to release, defend, indemnify and hold harmless the City of Fort Wayne, its officials, officers, employees, heirs, successors and assigns, from and against any and all claims, demands, or causes of action, including claims for contribution or indemnity, and the reasonable and necessary costs, including attorney's fees, incurred in the defense of any and all such claims that the Minor Child has or may have arising out of, related to, or resulting from the aforementioned Program(s) which allegedly occurred because of such Minor Child's participation in the Program(s).

I agree that City, its officials, employees, agents, and representatives have the authority to use pictures of my child taken during my child's participation in the Mayor's Youth Engagement Council. The pictures may be taken and used without my knowledge or payment to me.

Parent or Guardian Signature	Date
Student Signature	Date
Telephone number in case of emergency:	
Name of emergency contact and relationsl	hip to youth:

## Application Deadline is August 22, 2022

### Your completed application should only include the following:

- 1. Student Information
- 2. Short Answer
- 3. Two References
- 4. Parent/Guardian Signed Permission

# **Voluntary Affirmative Action Information**

(Completion of Information Below is Voluntary)

We consider all applicants without regard to race, color, religion, gender, sexual orientation, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

DATE:						
APPLICANT'S N	IAMELAST	FIRST	MIDDLE	AREA CODE PHONE		
ADDRESS	STREET	CITY	STATE	ZIP CODE		
REFERRAL S	OURCE:					
☐ CITY OF FOR	RT WAYNE WEBSITE	□ADVERTISEMENT	□ EMPLOYEE			
RELATIVE		$\square$ SCHOOL COUNSELOR	FRIEND			
□other N	NAME OF SOURCE (IF APPLICABLE)					
In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.						
<u>CHECK ONE</u> : □ MALE	□FEMALE					
CHECK ONE OF	THE FOLLOWING RACE / ETHNIC GROU		WO or MORE RACES (not H	ispanic or Latino)		
☐ AMERICAN INDIAN OR ALASKAN NATIVE ☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (not Hispanic or Latino)						

The City of Fort Wayne is an Equal Employment Opportunity Employer