



(Date)

COUNTY YOUTH BOARD APPLICATION FORM

		Check one Youth Adult
N		Adult
Name		
Address	City	Zip
Home Phone (include Area Code)	(Work Phone)	
Occupation		
Work Address		
	County	
Why would you like to be a member of	the Youth Board?	
Check () all that apply:		
When serving on a committee I feel mos	et comfortable:	
Being behind the scenes	At the podium speaking	Using my creativity
Giving committee reports	Organizing & carrying out tasks	Making phone calls
Other:		& contacts
My strongest committee skills are:		
Organizing	Working directly with people	Hands on activities
Securing donors (money or	Preparing for upcoming activities	Teaching others
in-kind donations)	Handling & processing paperwork	
What vouth development activities have	you been involved in: (check all that apply)	
Boys Scouts	Boys/Girls Club FFA	
Girl Scouts	Student Council UIL	
YMCA/YWCA	FCCLA Other	
RETURN APPLICATION TO:		
CEA Name		
Address	(Signature of Applicant) (Signature of	of Parent/Guardian if under 18)
Address	(Signature of ripplicant) (Signature of	or a control of an article (10)

(Date)

No Later than

Email