

YOUTH COUNCIL APPLICATION

2021-2022

The City of Hampton Youth Council is designed to give youth an experience to learn leadership skills and responsibility in the context of government and civic engagement.

Are you NEW or RETURNING to Youth Council? NEW RETURNING

If new, how did you learn about the Hampton Youth Council?

PERSONAL INFORMATION

Name	
Address	
City/County/State/Zip	
Home Telephone	
Cell Phone	
Email Address	
Emergency Contact	
Emergency Contact Phone	
School Attending	
Grade	
Age	
T-Shirt Size	

PARENTAL INFORMATION

Mother's Name	
Father's Name	
Mother's Cell Phone	
Father's Cell Phone	
Mother's Email Address	
Father's Email Address	
Guardian's Name	
Guardian's Cell Phone	
Guardian's Email Address	

1. Choose three (3) words to describe yourself.

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2. Then write about an experience or activity that shows these qualities in action.

3. Tell us about a personal accomplishment that makes you proud.

4. Describe a challenging experience. How did you handle it and what did you learn?

5. Describe any work experience (paid or volunteer) that you have had, including what you did and anything you gained/learned from it.

6. Describe any unique qualities and experiences that make you who you are.

7. From your own experience and knowledge, what does a good leader look like and do?

8. Why did you apply for the Hampton Youth Council and what do you want to gain from the program?

9. Name any organizations, clubs, or teams of which you are currently a member and any leadership roles you serve.

10. Why is civic education important for today's youth? (*Civic – is defined as the study or science of the privileges and obligations of citizens*)

11. If you could make one change affecting your High School, what would it be?

12. In your opinion, what is one of the most challenging issues facing youth today, and how does it affect your generation?

13. What officer position would you be interested in?

STUDENT PARTICIPATION AGREEMENT

The City of Hampton is committed to providing the best possible experience for the students who participate in our Youth Council cohort. To ensure that each student enjoys the full value of this program, it is essential that the student fully understand the responsibilities connected to this program. By signing this document, you acknowledge that you have read, understand, and accept the contents of the Handbook.

I agree to follow the rules and guidelines listed in the Youth Council Handbook.

Applicant's Signature _____ Date _____

PARENTAL PARTICIPATION AGREEMENT

Dear Parent/Guardian,

Thank you for allowing your student to participate in (Current Term) City of Hampton Youth Council cohort. Most activities will be local within Henry County; however, there are some which will be outside the County. Please complete the following information offering your permission for your child to participate. _____ has my permission to participate in the (Current Term) City of Hampton Youth Council cohort and attend all trips and program activities. I understand there are inherent risks involved with any trip or activity and, therefore, agree that the City of Hampton, together with its employees, representative, agents, and volunteers (collectively, "Hampton") shall not be responsible for and are hereby released from any liability for any personal injury, death, or property loss incurred in connection with any event occurring within the time noted above and/or during any program sponsored activity. I also authorize the City of Hampton to seek emergency medical treatment on behalf of me and/or my (minor) child in the even that such treatment is deemed necessary or appropriate by the City of Hampton, and I release the City of Hampton from any liability related to that decision or treatment.

I understand that participation is voluntary and further understand that transportation for any activity or event may be provided in vehicles driven by the City of Hampton employees or by third-party commercial contractors. I understand and agree that the scope of this release does not extend to willful, wanton, or intentional misconduct on the part of the City of Hampton.

I also, understand that under Georgia law, there is no liability for an injury or death of an individual entering City premises or participating in Youth Council activities if such injury or death results from the inherent risk of contracting COVID-19. You are assuming this risk by entering City premises or participating in Youth Council.

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____ Date _____

SCHOOL OFFICIAL SUPPORT AGREEMENT

As the educational leader for _____, I support his/her participation in the (Current Term) City of Hampton Youth cohort. I will work with the City of Hampton Government in resolving any problems, when necessary.

Printed Name and Title of School Official _____

Signature of School Official _____ Date _____

Include a letter of recommendation from two adults, (1) a teacher and (2) a community leader who has known you and can provide a testimony of your leadership potential and ability to manage the demands of both school and the Youth Council.

Applications are accepted from August 15, 2021, through September 15, 2021.

Mail completed application to: City Clerk Melissa Brooks, City of Hampton, P.O. Box 400, Hampton, GA 30228 or email to mbrooks@hamptonga.gov or call 770-946-4306.