



City of Hemet Youth Council Application

Clerk Stamp

Instructions

Please read the information within this application carefully and make sure to fill out all information and return it back in the time allotted. Additional sheets may be attached if more space is needed. Missing information may delay the processing of your application.

Date:	Grade:	Check One: <input type="checkbox"/> New Appointment <input type="checkbox"/> Re-Appointment
Date of Birth:		
Name:		
Email Address:		
Home Address:		
Phone Number:	Secondary Phone:	
School:	GPA:	
Parent/Guardian:		
Parent/Guardian Phone Number:		
Organizations, Honors, Affiliations:		

Submit To:

City of Hemet
City Clerk's Office
445 E Florida Avenue
Hemet, CA 92543
951-765-2395
clerkstaff@hemetca.gov

Important Dates:

Application Period: March 1 - April 30
Review/Interviews: May 1 - May 31
Youth Council Appointed: Early June
Terms: One Year June 1 - June 30



hemetca.gov/youthcouncil



City of Hemet Youth Council Questionnaire

Answer the following questions.
You may answer these on a separate sheet or on the next sheet.

1. Why are you applying for this position?

2. Why do you feel you are qualified for the Youth Council?

3. What experience do you have that has prepared you for this position?

4. What does the definition of a leader mean to you?

Applicant's Signature:

Date:

Parent/Guardian Signature:

Date: