



City of Hickory Youth Council

Application Form for 2024-2025

Nam	ne: Home Telephone:
Scho	ool:Grade in 2024-2025:
Hom	ne Address:
Ema	il:
men polic sche	nse note that membership on the Youth Council demands strict attendance. Youth Council nbers cannot miss more than three formal meetings per year and must adhere to an attendance by to qualify for re-appointment. There will be one formal meeting per month, which is tentatively eduled for the 3rd Monday of the month at 5:00 p.m. or 5:30 p.m. Members are also expected to plete service projects, attend city board and commission meetings, and other Youth Council events.
and	th Council members are also given the opportunity to serve on several boards and commissions attend programs to learn about city government, tour city facilities, volunteer at city events, and plete service projects.
the	e: Applicants will be considered for all openings for which they are eligible. All applicants must live within Hickory City Limits or attend a school that has representation on the council. City Residents are given rity in filling vacancies on the council. Rising 9th through 12th graders are eligible to apply.
1.	What personal skills and characteristics do you possess that would make you a good Council member?

2.	Please list any activities you will be involved in during the school year. (Include employment, sports, community, school, and church groups.)
3.	Please describe what you want to accomplish for youth in the City of Hickory while serving on the Youth Council. Also indicate why you should be selected as a member.

4. Include the recommendation form contained within the application. The reference should be from an adult who has known you and has worked with you in school or in non-school activities. The references should speak to your leadership potential and ability to manage the demands of both school and the Council.

Please make sure that your recommendation form is sent in a sealed envelope.

Student Signature:

I have read and understand the time commitment requi know the importance of academics and the necessity for on the Council. I can make such a commitment for the s	me to maintain or improve my G.P.A. while serving
Student Signature	Date
Parent/Legal Guardian Permission:	
I give my permission for Council member.	to seek the position of City of Hickory Youth
Parent/Guardian Signature	Date
Telephone number in case of emergency	
Name of emergency contact and relationship to youth _	
Children Places submit this small setting to Com. About	the Vauth Council Ctaff Linion All applications

Students: Please submit this application to Sam Abernethy Youth Council Staff Liaison. All applications must be received by 5:00 p.m. on Friday, May 31, 2024.

Applications can be submitted by mail or email to:

Sam Abernethy Youth Council Staff Liaison City of Hickory PO Box 398 Hickory, NC 28603 sabernethy@hickorync.gov

Note: Applicants will be considered for all openings for which they are eligible. All applicants must live within the Hickory City Limits or attend a school that has representation on the council. Rising 9th through 12th graders are eligible to apply. For questions about the council, please contact Sam Abernethy at (828) 323-7558 or sabernethy@hickorync.gov.

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Hickory Youth Council Reference Form

Name of Student	Date	
School	Grade	
(1) week of receiving it. The reference	niver below. Your reference must complete and return this form within may send the form directly to the Youth Council Staff Liaison if they ng sure it is submitted by the deadline. All applications must be rece.	1
All application materials must be mai	ed to:	
Sam Abernethy Youth Council Staff Liaison City of Hickory PO Box 398 Hickory, NC 28603 sabernethy@hickorync.gov		
Waiver of Access:		
I, the undersigned, waive the right of	personal access to the reference.	
Signature	Date	
Name of Reference		
Title/Position		
School/Firm/Organization		
Phone Number	Email Address	

Hickory Youth Council Reference Form (cont'd)

	Superior	Above Average	Average	Below Average	Unable to Judge
Character					
Concern for Others					
Responsibility					
Leadership Potential					
Initiative					
Ability to Work with Others					
Level of Maturity					
Oral Communication Skills					
Interest in Community Affairs					
Extra-Curricular Activities					

Please attach a brief letter that addresses the following questions:

- 1. For how long, and in what capacity, have you known the applicant?
- 2. What do you consider the applicant's primary interests, talents and strengths?
- 3. What are some of the applicant's weaknesses?
- 4. Describe the applicant's relationships with peers.
- 5. Describe the applicant's interest in community affairs.

Signature of Reference	Date	