

**City of Hickory  
Youth Council**  
Application Form for 2020-2021

Name: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

School: \_\_\_\_\_ Grade in 2020-2021: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_

*Please note that membership on the Youth Council demands strict attendance. Youth Council members cannot miss more than three formal meetings per year and must adhere to an attendance policy in order to qualify for re-appointment. There will be one formal meeting per month, which is tentatively scheduled for the 3rd Monday of the month alternating at 5:30 p.m. Members are also expected to complete service projects, attend city board and commission meetings, and other Youth Council events.*

*Youth Council members are also given the opportunity to serve on several boards and commissions and attend programs to learn about city government, tour city facilities, volunteer at city events, and complete service projects.*

**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 9<sup>th</sup> through 12<sup>th</sup> 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.

**Note: Recommendations and applications may be scanned and emailed as long as social distancing is recommended due to the COVID-19 pandemic.**

**Student Signature:**

I have read and understand the time commitment required for the City of Hickory's Youth Council. I also know the importance of academics and the necessity for me to maintain or improve my G.P.A. while serving on the Council. I am able to make such a commitment for the school year.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Parent/Legal Guardian Permission:**

I give my permission for \_\_\_\_\_ to seek the position of City of Hickory Youth Council member.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Telephone number in case of emergency \_\_\_\_\_

Name of emergency contact and relationship to youth \_\_\_\_\_

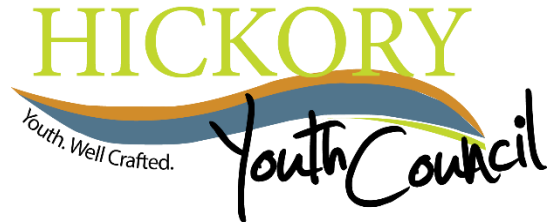
**Students:** Please submit this application to Dave Leonetti, Youth Council Staff Liaison. All applications must be received by close of business on June 15, 2020.

**Applications can be submitted by mail or email to:**

David Leonetti  
Youth Council Staff Liaison  
City of Hickory  
PO Box 398  
Hickory, NC 28603  
[dleonetti@hickorync.gov](mailto:dleonetti@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 extra-territorial zoning jurisdiction. Rising 9<sup>th</sup> through 12<sup>th</sup> graders are eligible to apply.**

This Page is Intentionally Left Blank



**Hickory Youth Council Reference Form**

Name of Student \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

**Student:** Please sign and date the waiver below. Your reference must complete and return this form within one (1) week of receiving it. The reference may send the form directly to the Youth Council Staff Liaison if they choose. You are responsible for making sure it is submitted by the deadline. All applications must be received by close of business on June 15, 2020.

All application materials must be mailed to:

David Leonetti  
Youth Council Staff Liaison  
City of Hickory  
PO Box 398  
Hickory, NC 28603

**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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level of Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in Community Affairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extra-Curricular Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**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**